

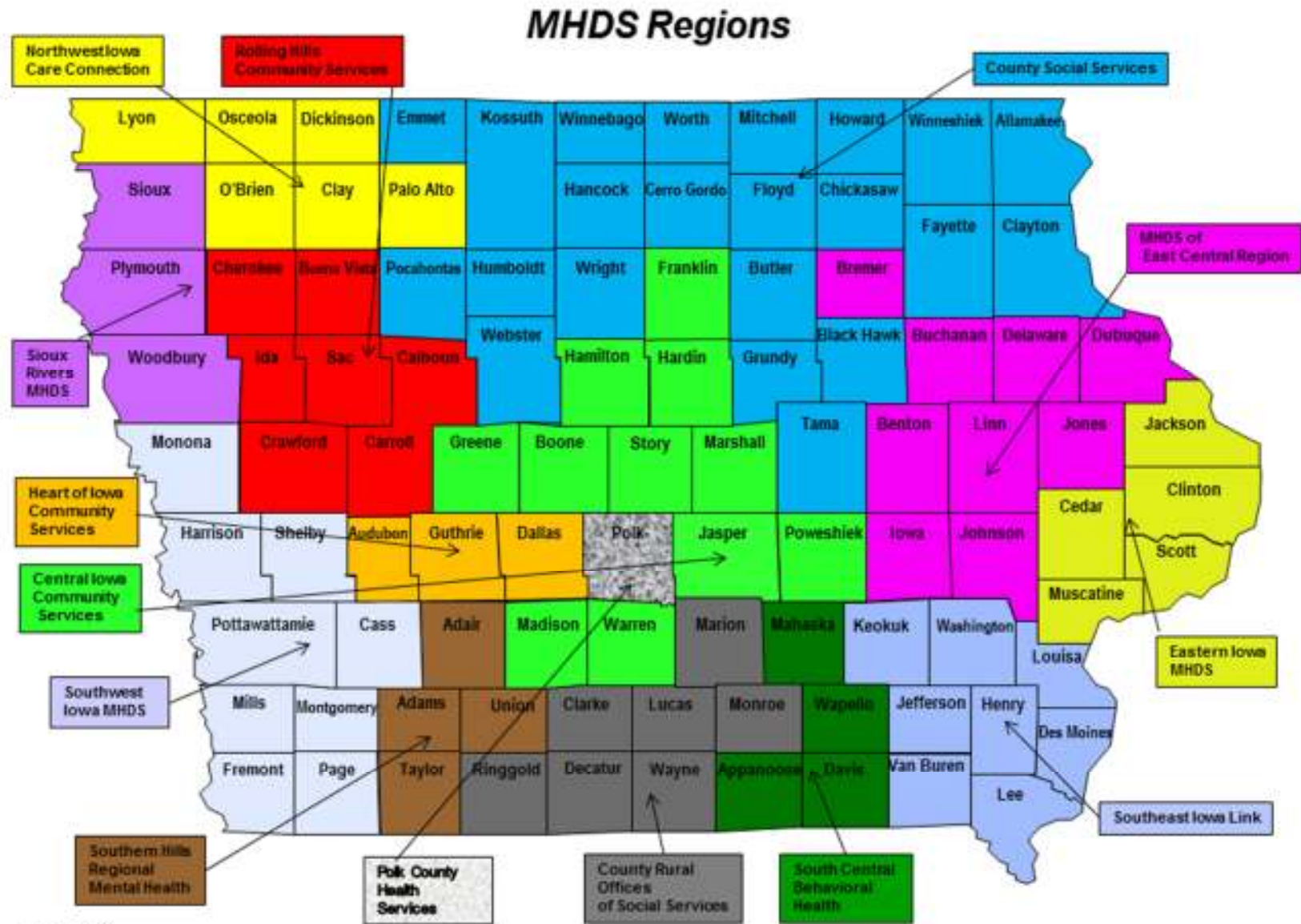
# Iowa Mental Health and Disability Services Regions: Statewide Report SFY2018

## Introduction

- Mental Health and Disability Services Redesign
  - Required Core Services - MHDS Regions are required to provide access to a core set of services to a target population of individuals with a mental illness or intellectual disability.
    - New Core Services – MHDS Regions are required to implement new services by July 1, 2021.
  - Statewide Standards - MHDS Regional Administration and core services are required to meet minimum statewide standards established in Iowa Administrative Code.
- Dashboard Measures – Uses MHDS Region data to measure:
  - Implementation and accessibility of core services to the target service population.
  - Implementation and accessibility of additional core services.
  - Extent of services provided to other populations such as children and individuals with developmental disabilities, brain injury, etc.
  - Utilization of MHDS Regional funded services.
  - Utilization of MHDS Regional funding.
- Limitations
  - Most of the data is from the SFY2018 annual reports which were required to be submitted in December, 2018. Data related to accessibility, quality and implementation of core and additional core mental health and disability services is reported by the MHDS Regions more frequently. Those dates are noted in **red**.
  - MHDS Regions do not yet report all information consistently:
    - The number of people funded is not yet reported in a consistent manner.
    - The use of funds that are “block granted” to service agencies is not consistently reported.
  - Does not include data on Medicaid funded services. As more individuals move to Medicaid funded services, the service utilization data will reflect the decrease in region funded services with a decrease in persons served for certain programs.
- Conclusions
  - MHDS Regions have demonstrated the ability to develop networks of service delivery that meet, and in some instances, exceed requirements.
  - Nearly all MHDS Regions have developed required core services that meet the accessibility standards.
  - MHDS Regions are expanding additional core services such as crisis services and jail diversion services.
  - Regions have continued efforts to standardize methods for reporting individuals served. The variance between regions and between SFY2017 and SFY2018 reflects the varying levels of progress amongst regions in implementing the standardized data collection plan.
  - A higher proportion of funding was spent on core and additional core services in SFY2018 than in SFY2017.
  - Administrative costs have decreased from SFY2017 to SFY2018.
  - Most MHDS Regional spending was on services for individuals with a mental illness.
  - Some additional population groups are being served.
  - The expansion of crisis services and evidence based practices has required an adjustment in inclusion criteria for service utilization. Additional services have been added as deemed necessary to accurately reflect the type of service.

## SFY2018 Iowa Mental Health and Disability Services Regional Map

The fourteen (14) MHDS regions in place in SFY2018 are shown on the map below.



July 1, 2018

## SFY2018 Regional Annual Submissions

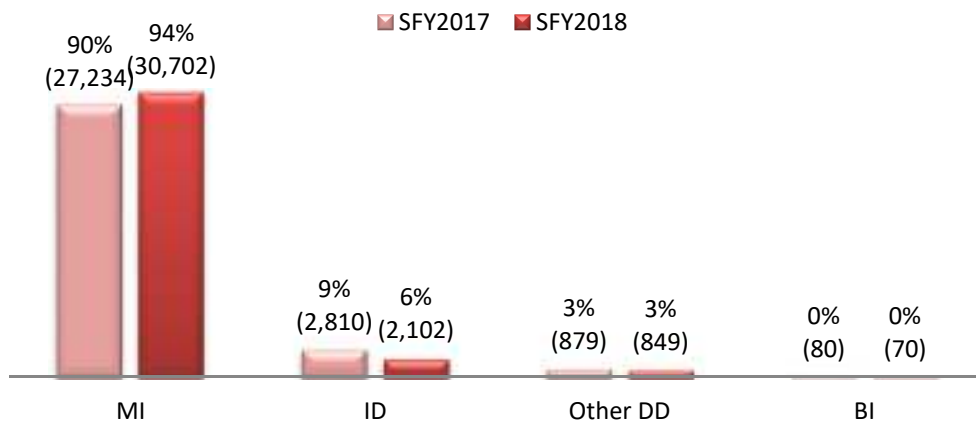
### Population

- Target Populations are defined as :
  - Adults (age 18 and above) with Mental Illness (MI) and/or Intellectual Disability (ID)
  - At or below 150% federal poverty level (FPL) – Some MHDS Regions extend eligibility to 200% of FPL
  - Not eligible for Medicaid or other third party insurance or the services are not covered by Medicaid or other third party insurance
- Populations referred to as “core plus populations” include children or adults with a brain injury (BI) or other developmental disability (DD).
- Data includes individuals funded where at least one day of service occurred in SFY2018.

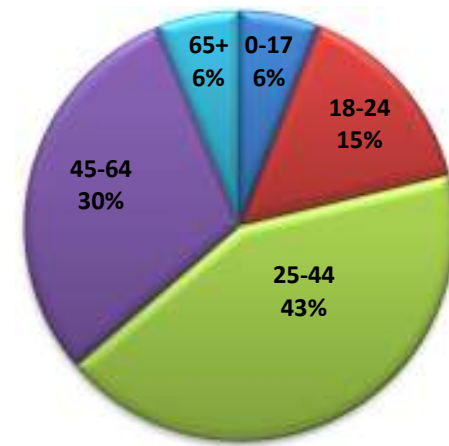
### Individuals Funded by Diagnosis and Age

- A total of 32,536 unduplicated individuals received Region funded services in SFY2018.
- Most of the individuals receiving Region funded services had a mental illness.
- Fewer individuals with ID received Region funded services because they are more likely to be eligible for Medicaid.
- About four percent of individuals have a dual diagnosis and are included in more than one category.
- Some Regions choose to fund children or adults with BI or DD.
- About 1,900 children received Region funded services.
- About 915 individuals with BI or DD received Region funded services.

**Statewide Percent (Number) of Individuals Served by Diagnosis, SFY2017 vs SFY2018**



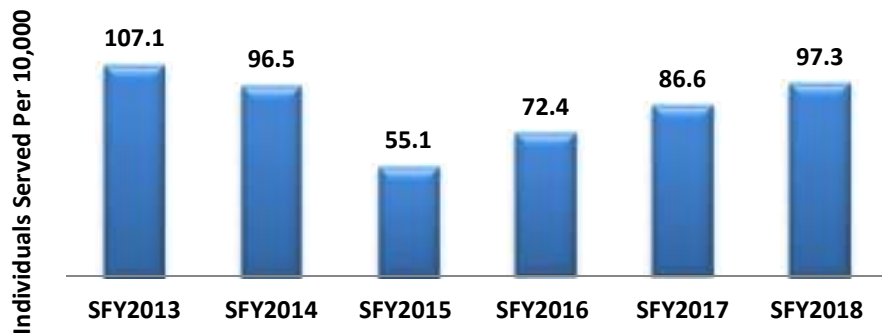
**Statewide Individuals Served by Age, SFY2018**



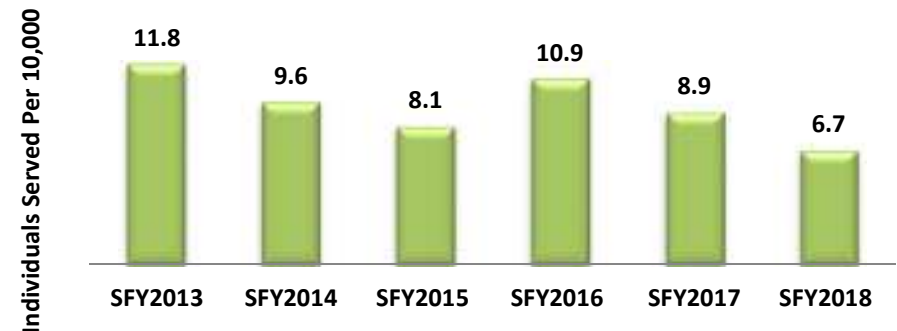
## Historical Funding of Target Populations

- About 98 individuals with MI per 10,000 people in the general population received Region funded services in SFY2018.
- About 7 individuals with ID per 10,000 people in the general population received Region funded services in SFY2018.
- The number of individuals receiving Region funded services had been steadily declining since SFY2013 because:
  - The State assumed the responsibility to provide the non-federal share of Medicaid funding in SFY2013 that was previously the counties' responsibility; and
  - The State implemented the Iowa Health and Wellness Plan in SFY2014 providing expanded Medicaid eligibility for individuals receiving behavioral health services that were previously the Regions' responsibility.
- The increase in number of individuals served from SFY2017 to SFY2018 is a result of several factors, including:
  - An increase in regional efforts to standardizing the methodology for collecting data on individuals served; and
  - Expansion of crisis services.
- Reasons for the difference between the number of individuals with MI and ID with services funded by the Regions includes:
  - More individuals with ID are eligible for Medicaid;
  - Greater array of services funded under Medicaid for individuals with ID; and
  - Individuals with MI may be eligible under the Iowa Health and Wellness Plan, but must have serious mental illness to be eligible for a greater array of Medicaid funded services.

**Statewide MI Population Served Per 10,000 ,  
SFY2013 - SFY2018**



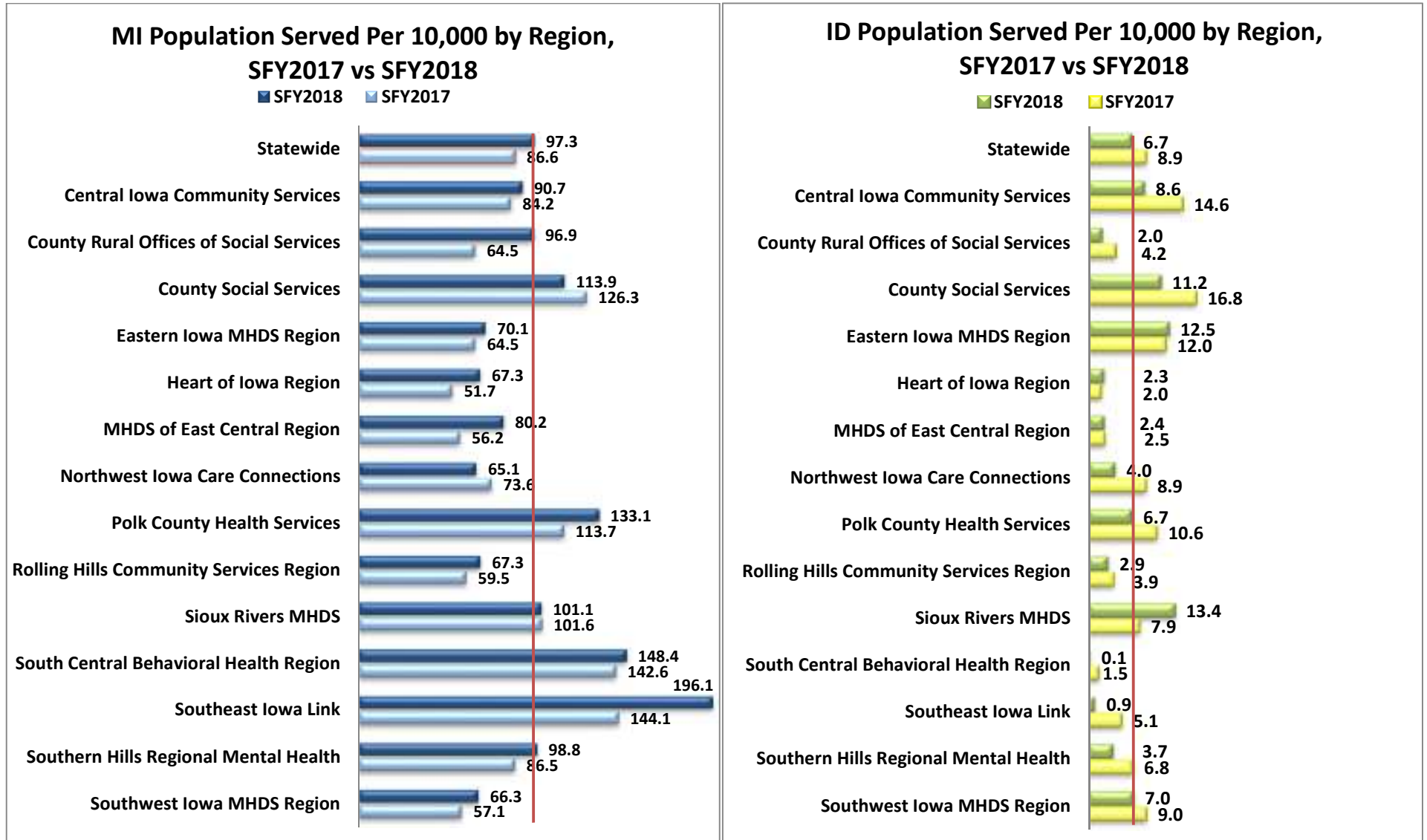
**Statewide ID Population Served Per 10,000,  
SFY2013 - SFY2018**



- A standardized indicator was used to allow a comparison by year and region regardless of the size of the region. The measure is the number of individuals with MI and/or ID served by the region divided by the population of the region multiplied by ten thousand.

## SFY2018 Funding of Target Populations by Region

- Reasons there is a variance between the number of individuals Regions fund services for:
  - The method used for counting the number of individuals receiving services in SFY2018 was not reported in a standardized manner.
  - Regions' policies requiring individuals to first access Medicaid funding differs.
  - Demographics of Regions vary.



## Expenditures

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- Expenditures spent on services include:
  - All expenditures spent on individuals funded by the regions
  - Services funded where at least one day of service was in SFY2018
  - Data does not include administrative costs
- According to the SFY2018 Regional Annual Reports, Regions received most of their funding from the following sources in SFY2018
  - \$85 M county property taxes
  - \$9.7 M from intergovernmental revenues
  - \$2 M from local miscellaneous revenue
- The Regions ended SFY2018 with about a \$121.8 M fund balance.

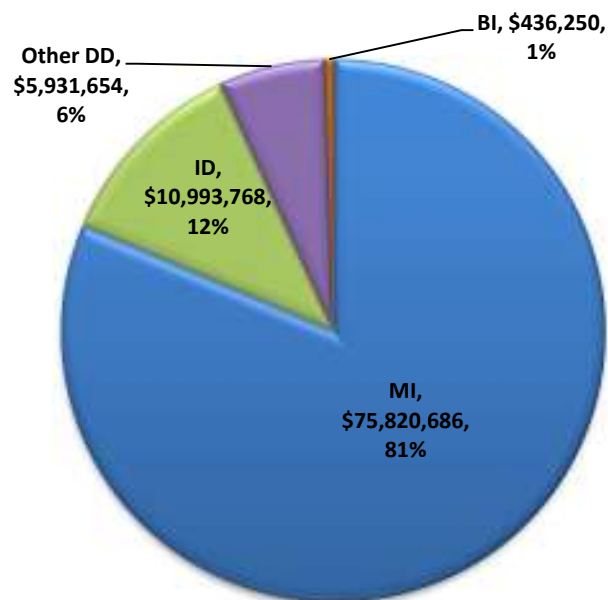
## Region Funded Services by Diagnosis and Type of Service

- Regions spent \$97,157,550 on services for all individuals whose services were funded by the regions.
  - \$82.5 M for individuals with MI;
  - \$9.3 M for individuals with ID;
  - \$5.2 M for individuals with other DD; and
  - \$248,000 for individuals with BI.
- Most services funded by Regions are not required.
  - **Core services** are the services Regions are required by Iowa Code to fund.
  - **Additional core services** are services identified in Iowa Code that Regions are to fund when public funds are made available for such services.
  - **Community living supports** are those services that Regions are not required to fund, but choose to fund for eligible residents of their region. Community living supports are critical to a person's well-being and life in the community. It also includes the mental health commitment costs Iowa Code mandates Regions to fund.
- Regions spent the following on core, additional core and community living supports:
  - Core services are \$31.8 M.
  - Additional core services are \$17.2 M.
  - Community living supports are \$58.5 M.
- Regions spent \$82,468,657 on services for individuals with MI whose services were funded by the region:
  - Core services are \$24.5 M.
  - Additional core services are \$16.7 M.
  - Community living supports are \$41.3 M.
- The Regions spent \$9,258,618 on services for individuals with ID whose services were funded by the region:

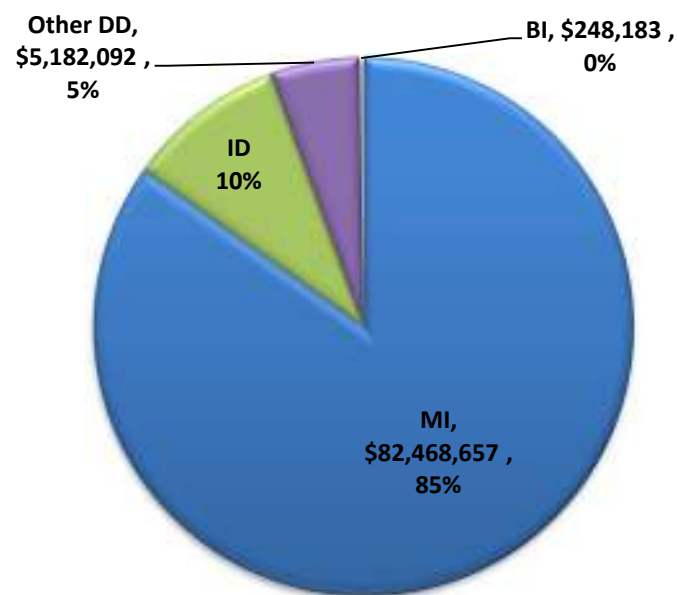


- Core services are \$4 M.
- Additional core services are \$441,000.
- Community living supports are \$4.8 M.
- The Regions spent \$5,430,275 on services for individuals with other DD and BI whose services were funded by the region:
  - Core services are \$3.3 M.
  - Additional core services are \$63,000.
  - Community living supports services are \$2.1 M.
- Total expenditures for services to individuals have increased by 4% since SFY2017.
  - Expenditures for individuals with MI increased for core services by \$2.8 M, additional core services by \$2.4 M and community living supports increased by \$1.5 M.
  - Expenditures for individuals with ID decreased for core services by \$1.2 M, additional core services by \$64,000 and community living supports by \$473,000.
  - Overall, expenditures increased for Community & Coordination Services by 12% (+\$1.3 M), Housing & Community Living Services by 1% (+\$232,000), and Treatment Services by 11% (+\$4 M). Expenditures decreased for Vocational & Day Services by 21% (-\$1.6 M)

**Statewide Expenditures by Diagnosis, SFY2017;  
Total Amount = \$93,182,358**

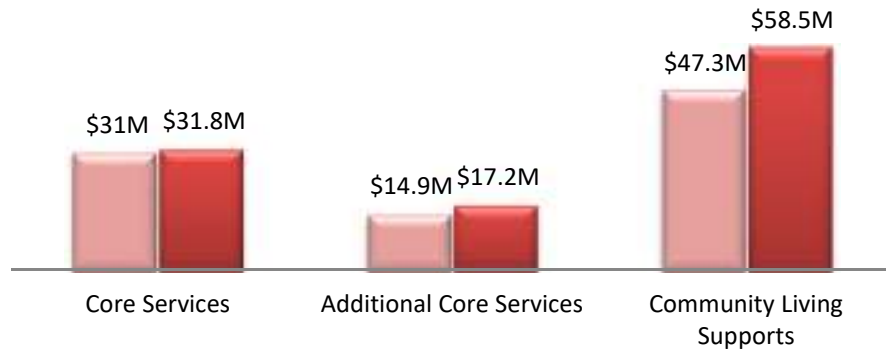


**Statewide Expenditures by Diagnosis, SFY2018;  
Total Amount = \$97,157,550**



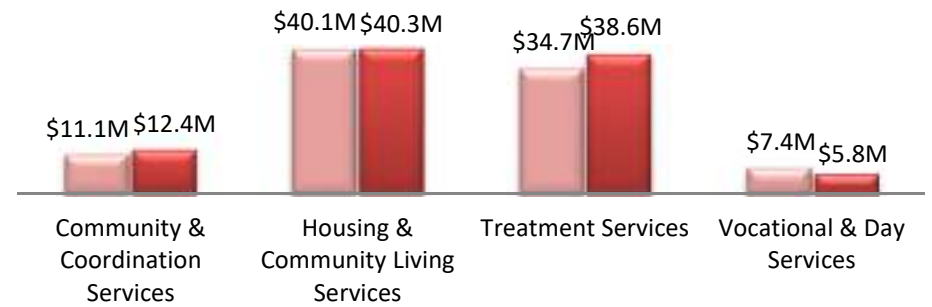
### Expenditures by Core/ Additional Core/ Community Living Supports

■ SFY2017 ■ SFY2018

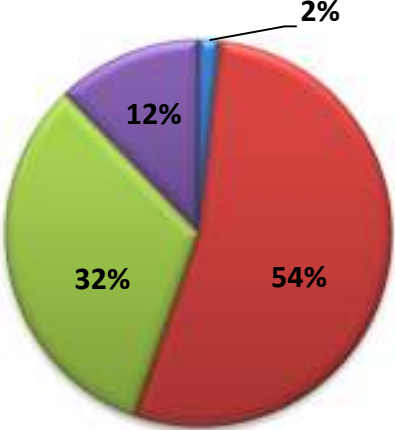
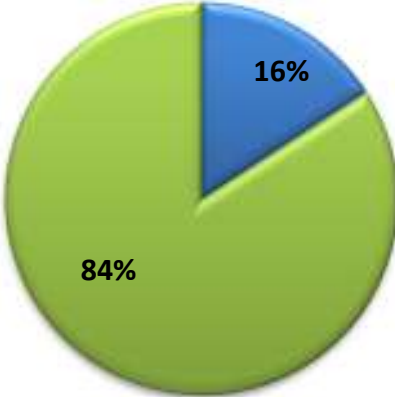
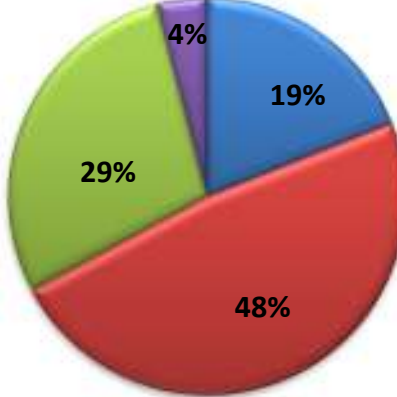


### Expenditures by Type of Service

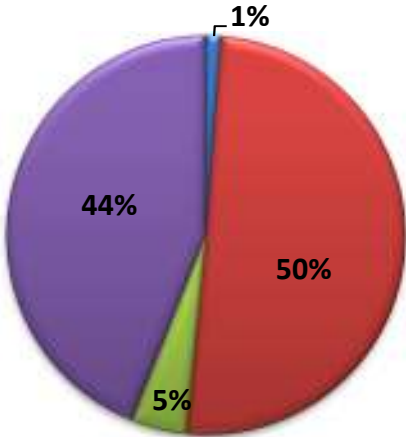
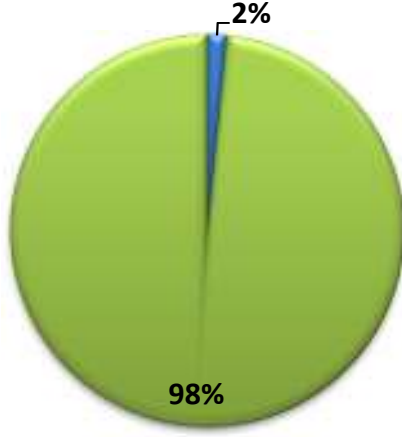
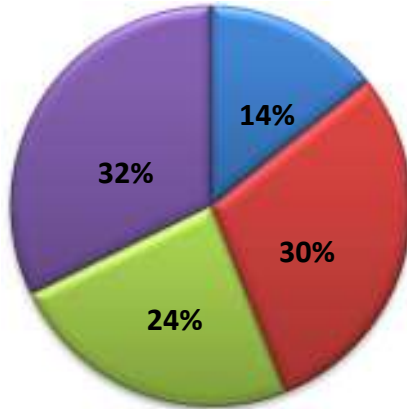
■ SFY2017 ■ SFY2018

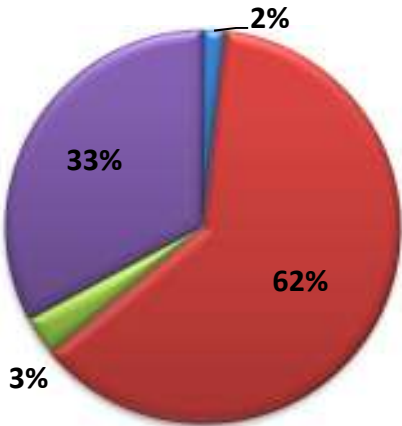
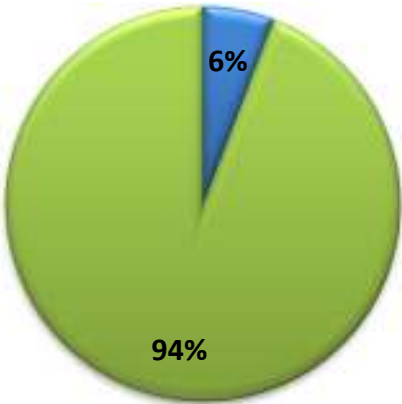
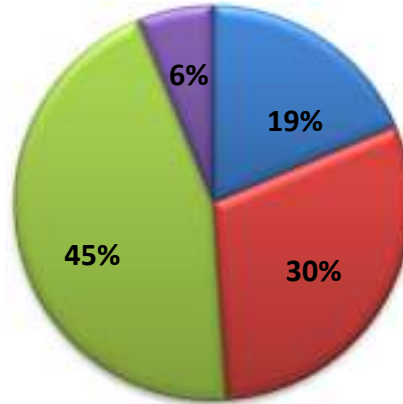




Total Expenditures for Regional Funded Services			
Services – All Diagnosis	Core Services	Additional Core Services	Community Living Supports
Community & Coordination Services	\$ 558,088	\$ 2,716,610	\$ 9,138,682
Housing & Community Living Services	\$ 17,061,736	\$ 16,000	\$ 23,212,806
Treatment Services	\$ 10,314,560	\$ 14,457,891	\$ 13,834,530
Vocational & Day Services	\$ 3,878,202	\$ -	\$ 1,968,445
TOTAL	\$ 31,812,586	\$ 17,190,501	\$ 58,518,349
			

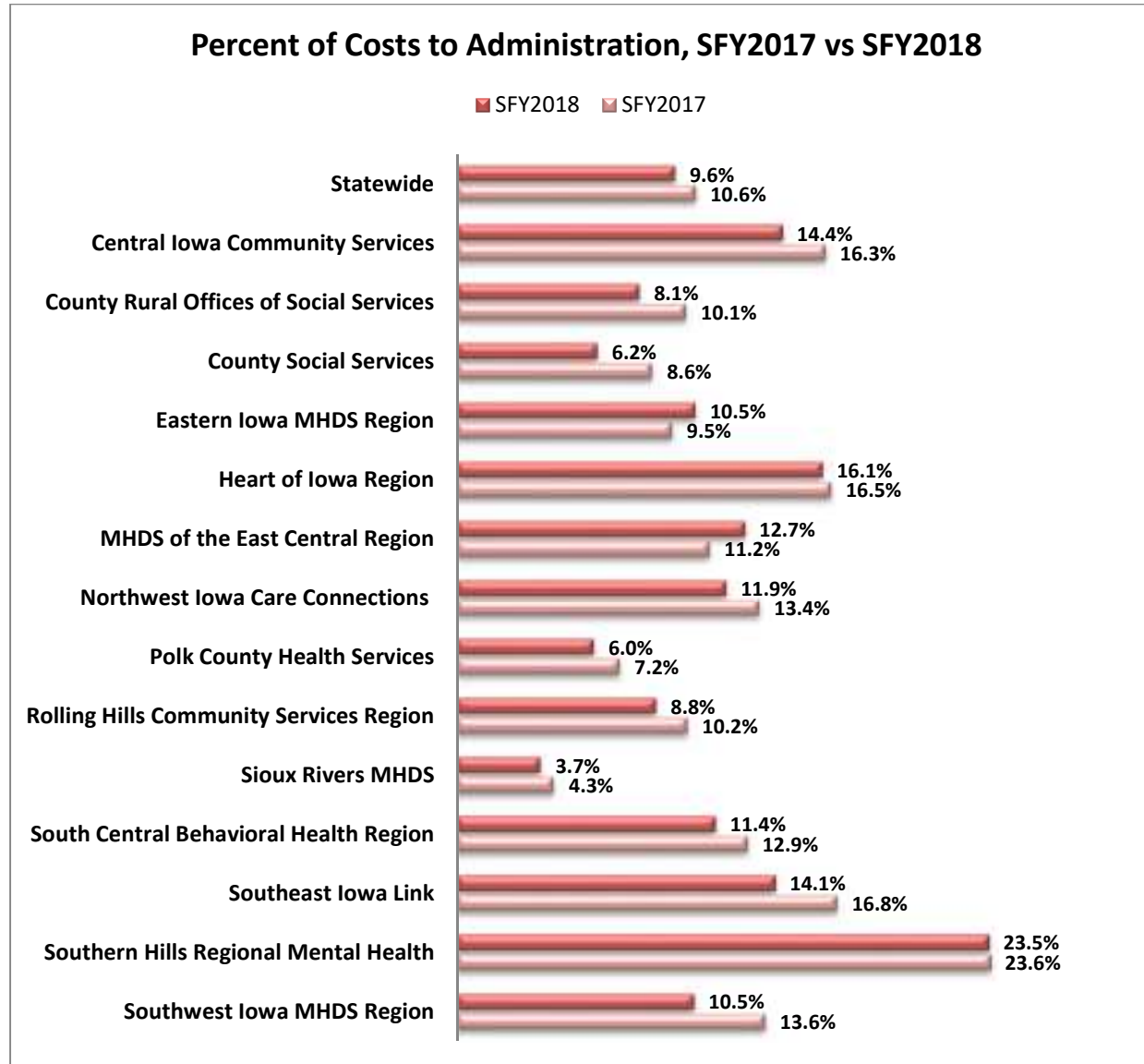
Expenditures for Regional Funded Services for Individuals with MI				
		Core Services	Additional Core Services	Community Living Supports
Community & Coordination Services		\$ 451,170	\$ 2,705,820	\$ 8,067,039
Housing & Community Living Services		\$ 12,983,106	\$ 16,000	\$ 21,164,967
Treatment Services		\$ 10,028,853	\$ 13,964,232	\$ 11,766,487
Vocational & Day Services		\$ 1,031,106	\$ -	\$ 289,876
TOTAL		\$ 24,494,236	\$ 16,686,052	\$ 41,288,369

Expenditures for Regional Funded Services for Individuals with ID			
	Core Services	Additional Core Services	Community Living Supports
Community & Coordination Services	\$ 48,029	\$ 7,127	\$ 687,462
Housing & Community Living Services	\$ 2,020,066	\$ -	\$ 1,425,931
Treatment Services	\$ 179,635	\$ 434,151	\$ 1,143,565
Vocational & Day Services	\$ 1,761,536	\$ -	\$ 1,551,115
TOTAL	\$ 4,009,266	\$ 441,278	\$ 4,808,074
			

Expenditures for Regional Funded Services for Individuals with Other DD and BI				
		Core Services	Additional Core Services	Community Living Supports
Community & Coordination Services		\$ 58,889	\$ 3,663	\$ 384,181
Housing & Community Living Services		\$ 2,058,564	\$ -	\$ 621,907
Treatment Services		\$ 106,072	\$ 59,508	\$ 924,478
Vocational & Day Services		\$ 1,085,560	\$ -	\$ 127,454
TOTAL		\$ 3,309,084	\$ 63,171	\$ 2,058,020
				

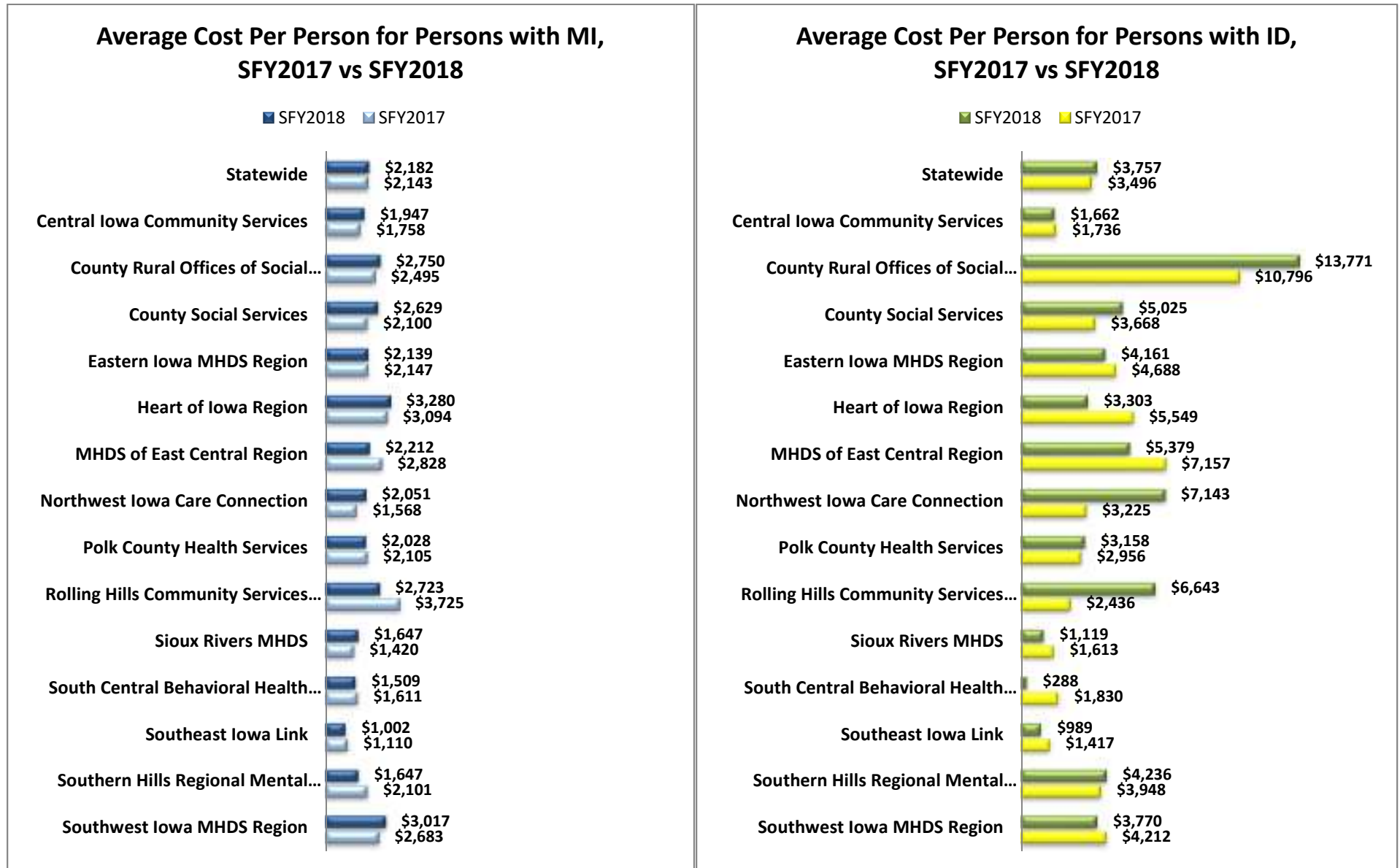
## Administrative Costs by Region

- The data represent the percent of total expenditures that are attributed to administrative payments.
- The data exclude funds transferred between region and member county accounts.
- Statewide administrative expenditures decreased from \$11 M to 10.4M (six percent decrease) from SFY2017 to SFY2018.



## Cost per Person for Target Populations by Region

- Cost per person data include payments associated with an individual.
- There was two percent increase in cost per person for individuals with MI and a seven percent increase in cost per person for individuals with ID from SFY2017 to SFY2018.



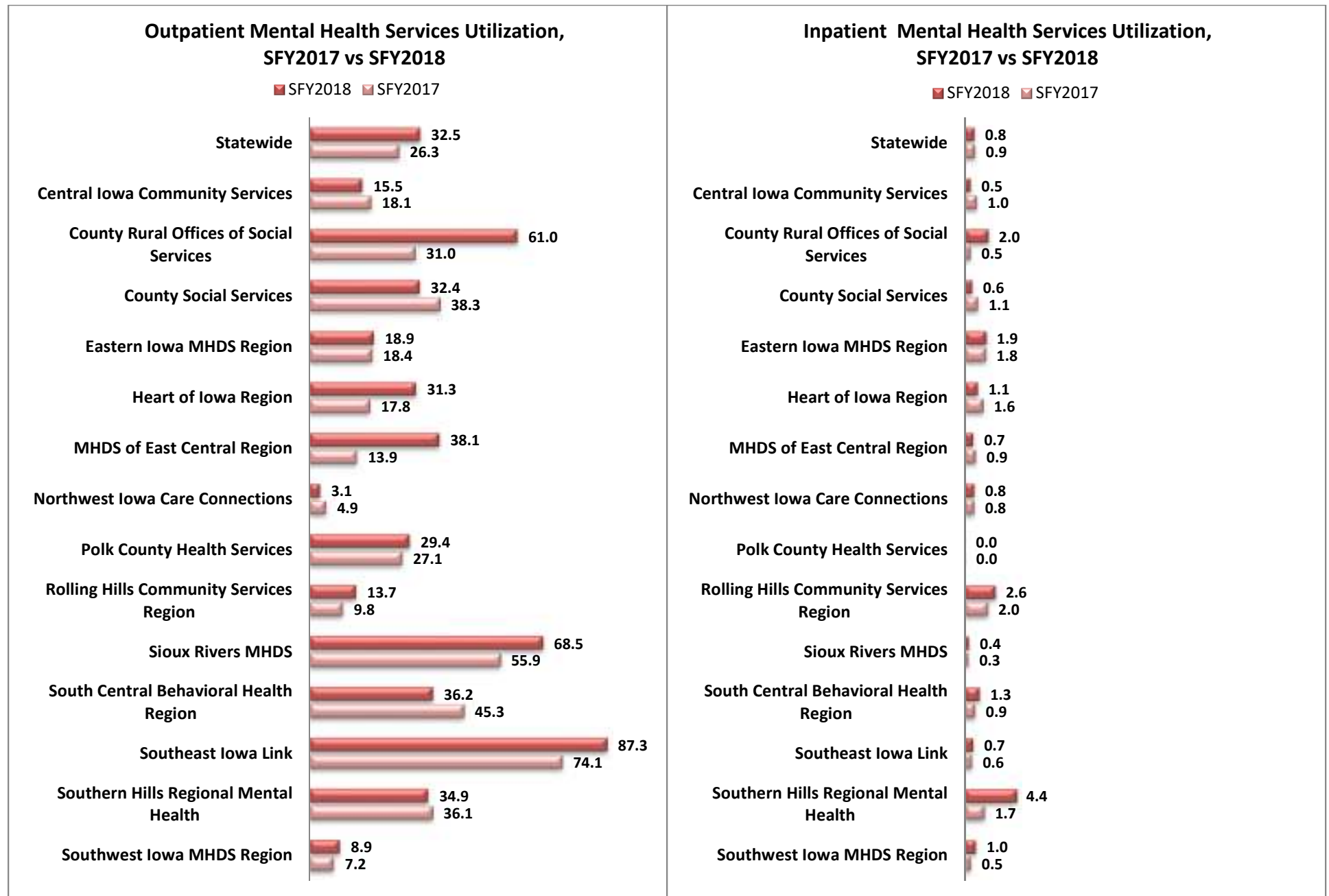


## Service Utilization

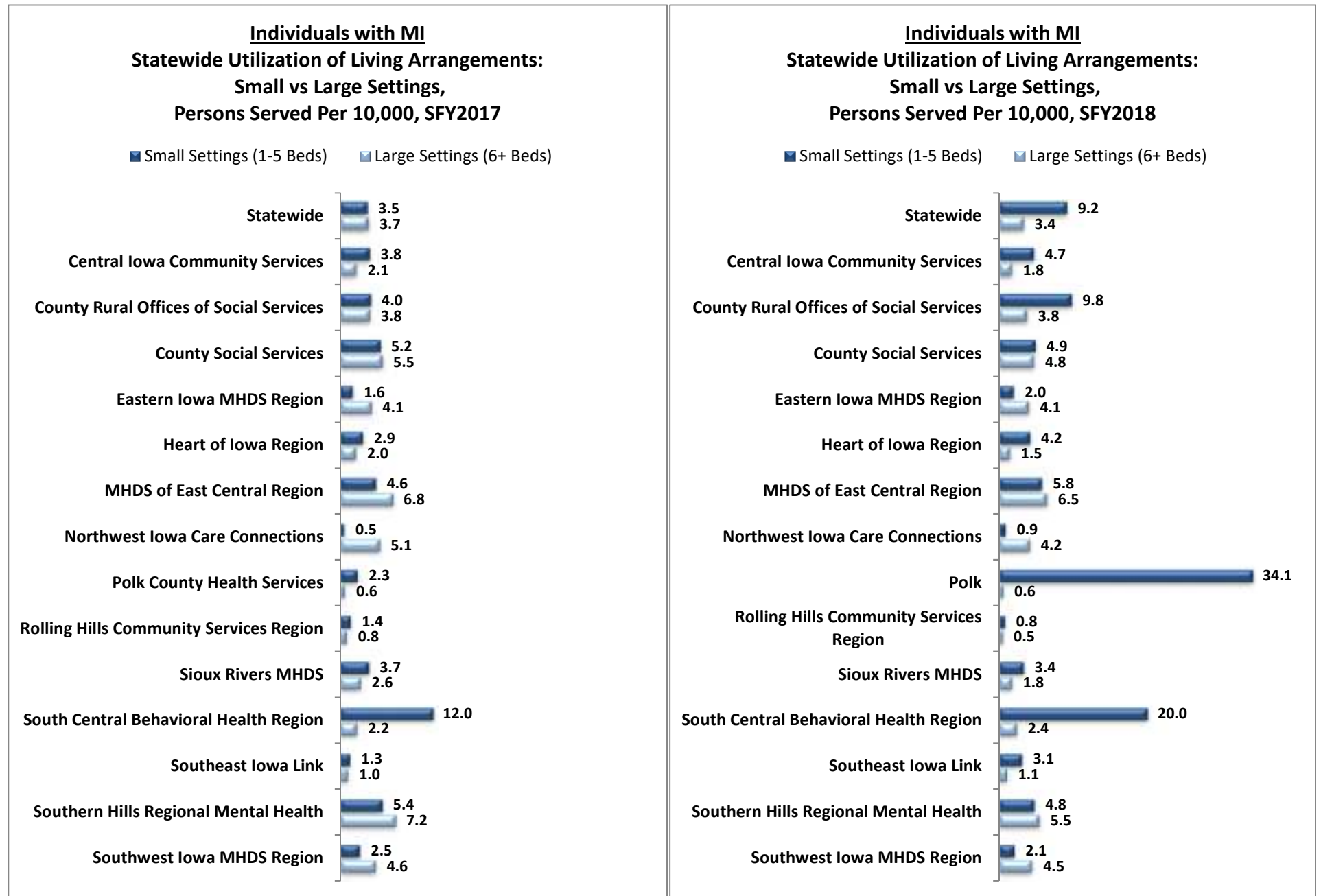
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- The following charts show the number of individuals utilizing Region funded services per 10,000 in the general population of the Region. This standardized indicator allows a comparison region to region regardless of the population of the Region.
- Data includes individuals funded where at least one day of service was in SFY2018.
- Reasons there is a variance between the number of individuals Regions fund services include:
  - The method used for counting the number of individuals receiving services in SFY2018 was not reported in a standardized manner;
  - Regions' policies requiring individuals to first access Medicaid funding differs; and
  - Demographics of Regions vary.
- The higher utilization of outpatient mental health services decreases the utilization of inpatient mental health services.
- Individuals living in smaller based settings and utilizing integrated services supports the principles of Olmstead.
  - Smaller living settings include the provision of services and supports to keep people in their own home. This includes but is not limited to long term rental assistance and supported housing.
- Reasons there is a variance between SFY2017 and SFY2018 in number of individuals reported in some Regions include:
  - Efforts made by those Regions to standardize reporting for individuals served; and
  - The expansion of crisis services and evidence based practices has required an adjustment in inclusion criteria for service utilization. Additional services have been added as deemed necessary to accurately reflect the type of service.

## Statewide Utilization of Outpatient and Inpatient Mental Health Services

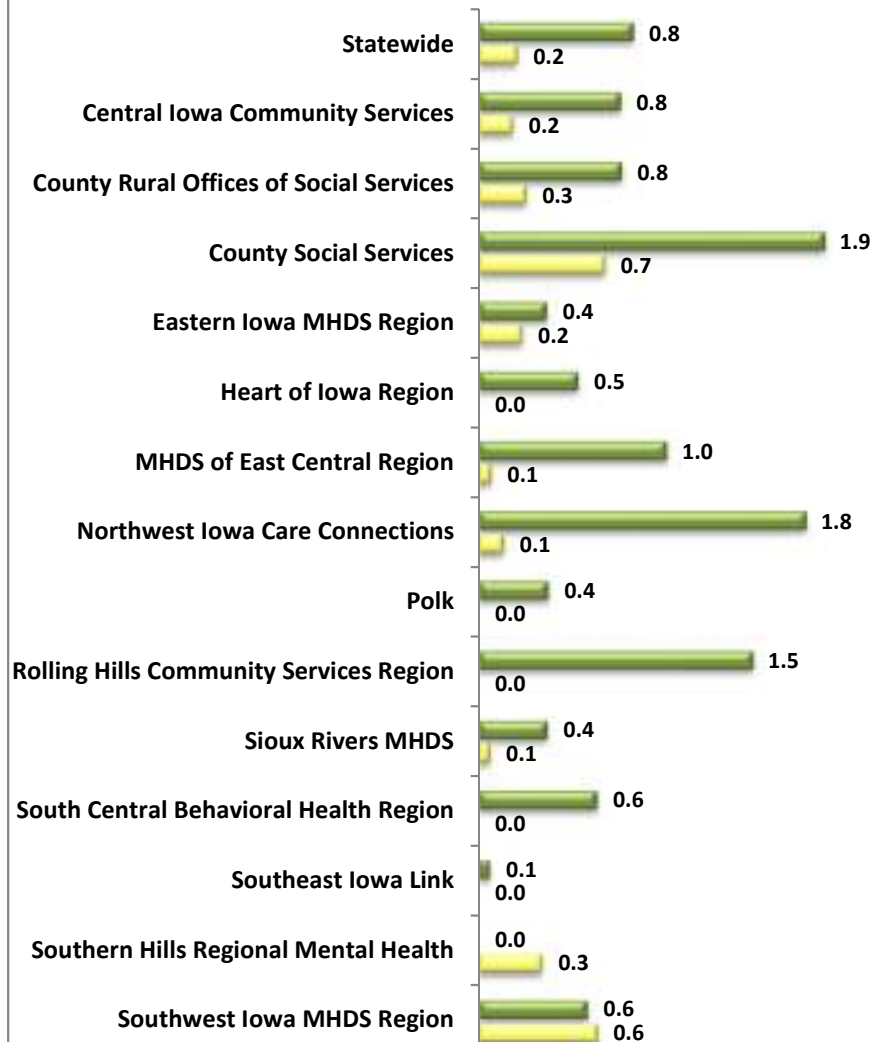


## Statewide Utilization of Living Arrangements



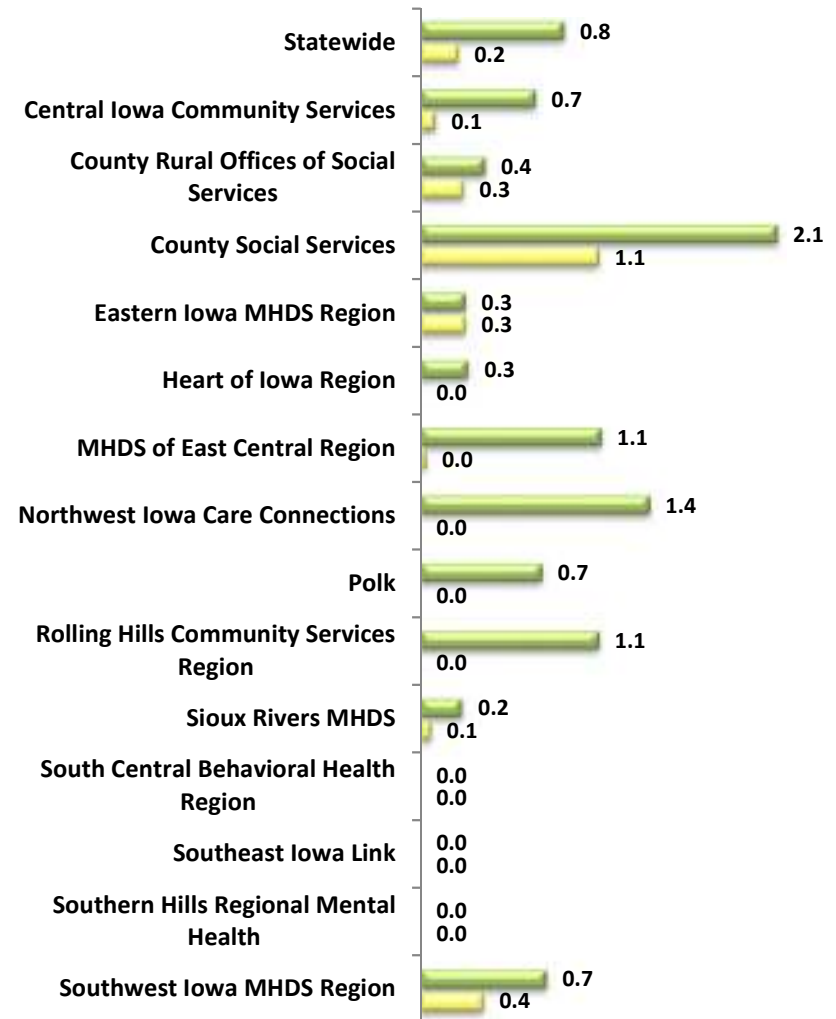
**Individuals with ID**  
**Statewide Utilization of Living Arrangements:**  
**Small vs Large Settings,**  
**Persons Served Per 10,000, SFY2017**

■ Small Settings (1-5 Beds)    ■ Large Settings (6+ Beds)

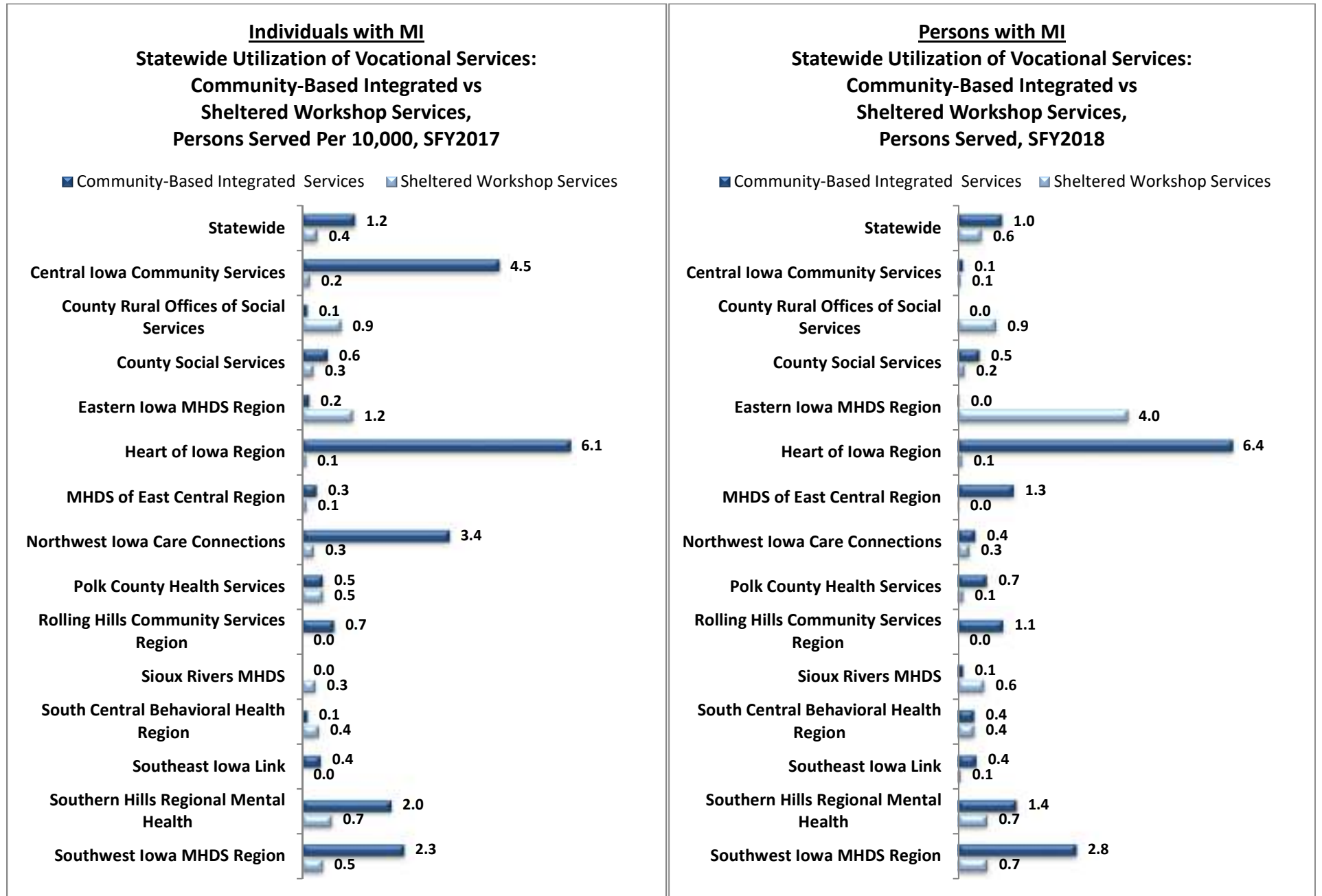


**Individuals with ID**  
**Statewide Utilization of Living Arrangements:**  
**Small vs Large Settings,**  
**Persons Served Per 10,000, SFY2018**

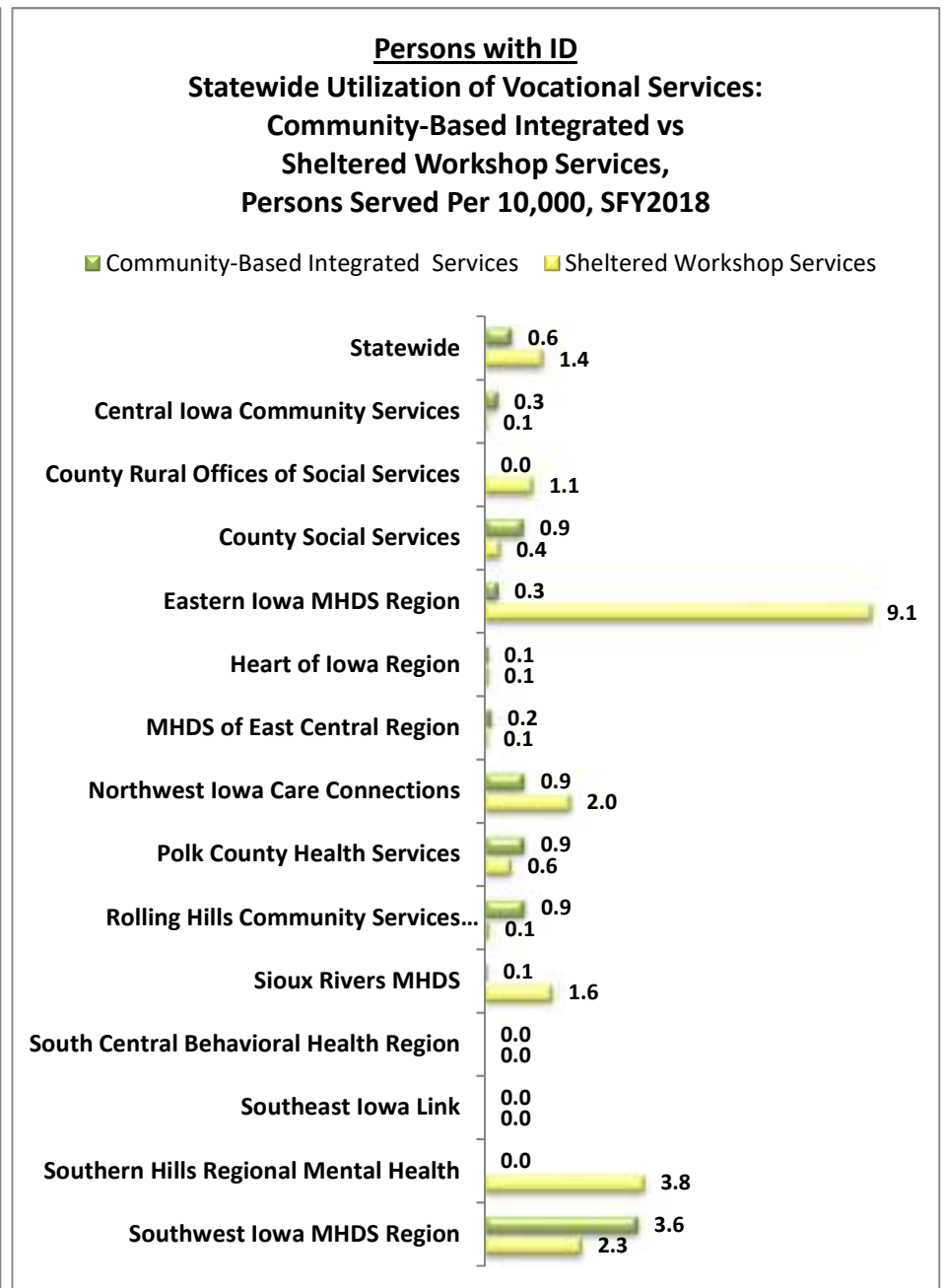
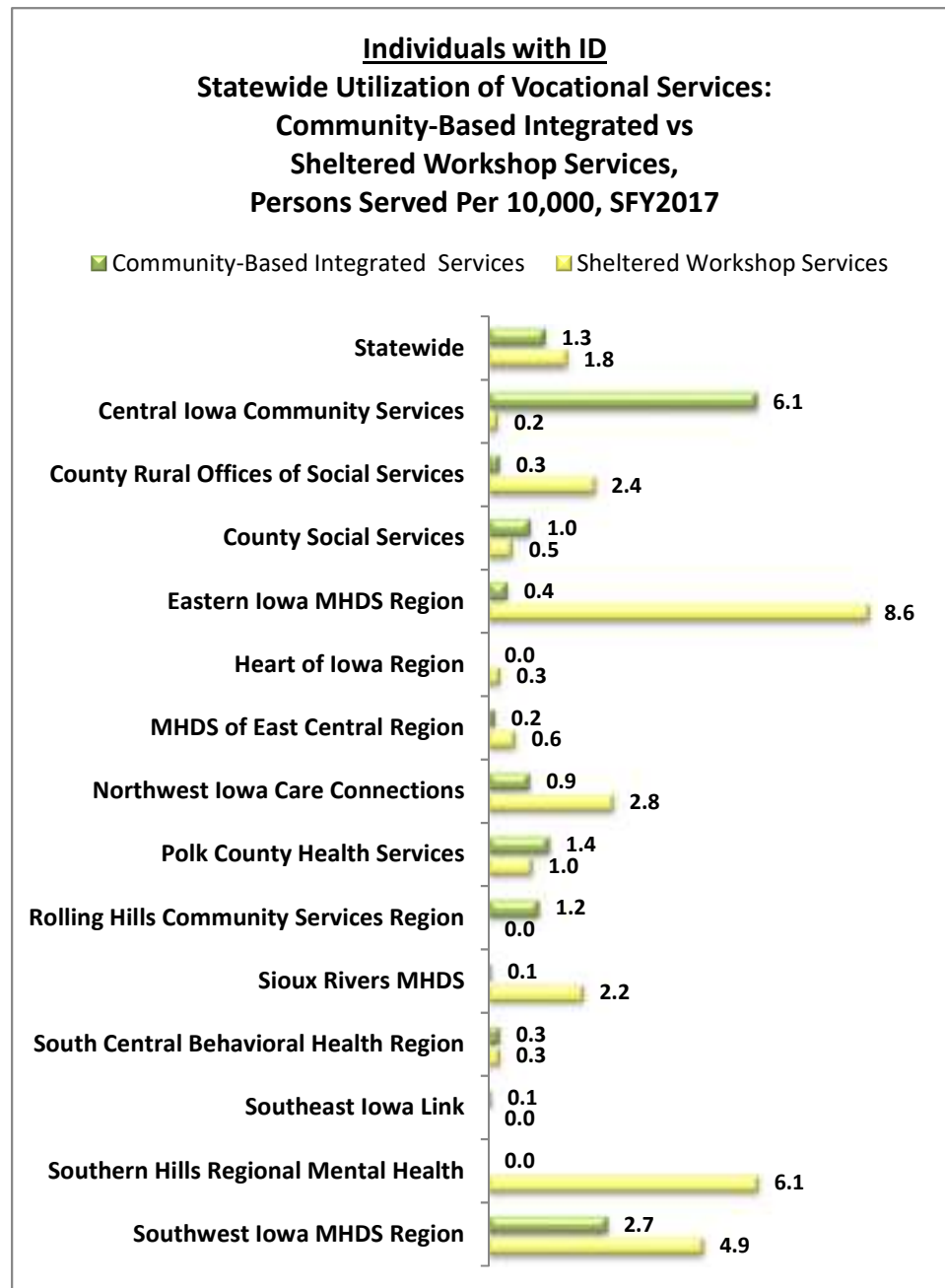
■ Small Settings (1-5 Beds)    ■ Large Settings (6+ Beds)



## Statewide Utilization of Vocational Services



## Statewide Utilization of Vocational Services





## Quarterly MHDS Region Report: SFY2019 Quarter 4

### Accessibility

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- Iowa Administrative Code sets access standards for core services and specifies either the maximum distance a person must travel or the maximum time a person can wait to receive services.
- The data are as of **June 30, 2019** as reported by the Regional CEO based on services funded by the regions. Accessibility can change throughout the year.
- Nearly all core services are provided and meet accessibility standards for almost all MHDS Regions.
- Reasons for not meeting access standards include: the availability of service providers throughout the region, and the interpretation of the standards by individual Regional CEOs. In collaboration with DHS, CEOs are working on a more uniform interpretation and reporting process for each of the access standards.
- Regions report other factors effecting service delivery include need for intense services for individuals with challenging behaviors.

## Core Services: Access Standards Region Status

Status as of End of SFY2019 Quarter 4 ( <u>June 30, 2019</u> )								
Region	TREATMENT (Outpatient): Assessment and Evaluation				TREATMENT (Outpatient): Mental Health Outpatient Therapy			
	Timeliness: Emergency	Timeliness: Urgent	Timeliness: Routine	Proximity	Timeliness: Emergency	Timeliness: Urgent	Timeliness: Routine	Proximity
	During an emergency, outpatient services shall be initiated to an individual within 15 minutes of telephone contact	Outpatient services shall be provided to an individual within one hour of presentation or 24 hours of telephone contact	Outpatient services shall be provided to an individual within four weeks of request for appointment	Outpatient services shall be offered within 30 miles for an individual residing in an urban community and 45 minutes for an individual residing in a rural community	During an emergency, outpatient services shall be initiated to an individual within 15 minutes of telephone contact	Outpatient services shall be provided to an individual within one hour of presentation or 24 hours of telephone contact	Outpatient services shall be provided to an individual within four weeks of request for appointment	Outpatient services shall be offered within 30 miles for an individual residing in an urban community and 45 minutes for an individual residing in a rural community
Central Iowa Community Services	Met	Met	Met	Met	Met	Met	Met	Met
County Rural Offices of Social Services	Met	Met	Met	Met	Met	Met	Met	Met
County Social Services	Met	Met	Met	Met	Met	Met	Met	Met
Eastern Iowa MHDS Region	Met	Met	Met	Met	Met	Met	Met	Met
Heart of Iowa Region	Met	Met	Met	Met	Met	Met	Met	Met
MHDS of East Central Region	Met	Met	Met	Met	Met	Met	Met	Met
Northwest Iowa Care Connections	Met	Met	Met	Met	Met	Met	Met	Met
Polk County Health Services	Met	Met	Met	Met	Met	Met	Met	Met
Rolling Hills Community Services Region	Met	Met	Met	Met	Met	Met	Met	Met
Sioux Rivers MHDS	Met	Met	Met	Met	Met	Met	Met	Met
South Central Behavioral Health Region	Met	Met	Met	Met	Met	Met	Met	Met
Southeast Iowa Link	Met	Met	Met	Met	Met	Met	Met	Met
Southern Hills Regional Mental Health	Met	Met	Met	Met	Met	Met	Met	Met
Southwest Iowa MHDS Region	Met	Met	Met	Met	Met	Met	Met	Met

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Status as of End of SFY2019 Quarter 4 ( <b>June 30, 2019</b> )							
Region	TREATMENT (Outpatient): Prescribing and Management				TREATMENT: Mental Health Inpatient Therapy		TREATMENT: Assessment and Evaluation after Inpatient Treatment
	Timeliness: Emergency	Timeliness: Urgent	Timeliness: Routine	Proximity	Timeliness: Emergency	Proximity	Timeliness: Assessment/Evaluation
	During an emergency, outpatient services shall be initiated to an individual within 15 minutes of telephone contact	Outpatient services shall be provided to an individual within one hour of presentation or 24 hours of telephone contact	Outpatient services shall be provided to an individual within four weeks of request for appointment	Outpatient services shall be offered within 30 miles for an individual residing in an urban community and 45 minutes for an individual residing in a rural community	An individual in need of emergency inpatient services shall receive treatment within 24 hours	Inpatient services shall be within a reasonably close proximity to the region (100 miles)	An individual who has received inpatient services shall be assessed and evaluated within four weeks of discharge
Central Iowa Community Services	Met	Met	Met	Met	Met	Met	Met
County Rural Offices of Social Services	Met	Met	Met	Met	Met	Met	Met
County Social Services	Met	Met	Met	Met	Met	Met	Met
Eastern Iowa MHDS Region	Met	Met	Met	Met	Met	Unmet	Met
Heart of Iowa Region	Met	Met	Met	Met	Met	Met	Met
MHDS of East Central Region	Met	Met	Met	Met	Met	Met	Met
Northwest Iowa Care Connections	Met	Met	Met	Met	Met	Met	Met
Polk County Health Services	Met	Met	Met	Met	Met	Met	Met
Rolling Hills Community Services Region	Met	Met	Met	Met	Met	Met	Met
Sioux Rivers MHDS	Met	Met	Met	Met	Met	Met	Met
South Central Behavioral Health Region	Met	Met	Met	Met	Met	Met	Met
Southeast Iowa Link	Met	Met	Met	Met	Met	Met	Met
Southern Hills Regional Mental Health	Met	Met	Met	Met	Met	Met	Met
Southwest Iowa MHDS Region	Met	Met	Unmet	Met	Met	Met	Met

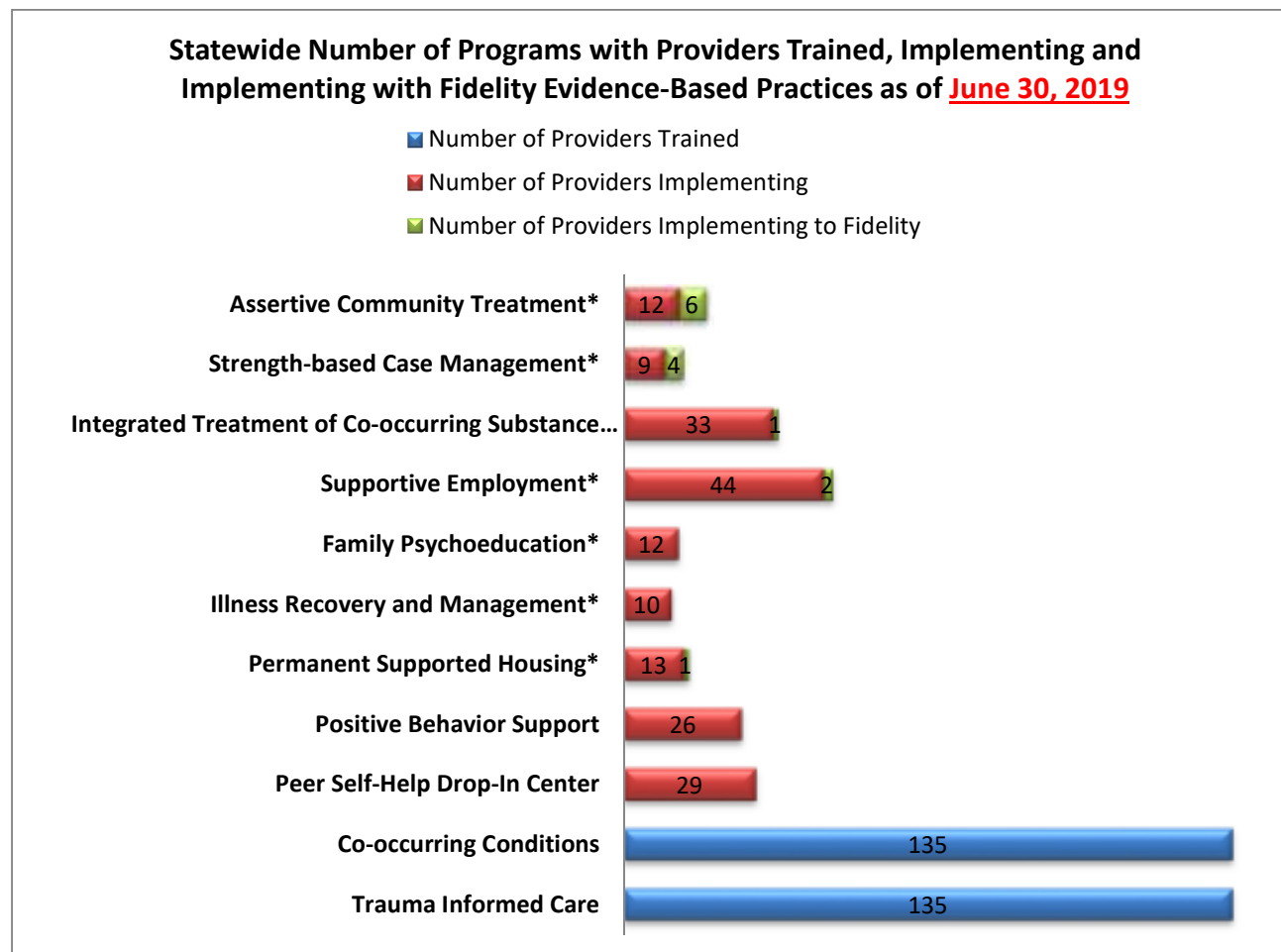
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Status as of End of SFY2019 Quarter 4 ( <b>June 30, 2019</b> )								
Region	CRISIS: Twenty Four Hour Crisis Response		SUPPORT FOR COMMUNITY LIVING	SUPPORT FOR EMPLOYMENT	RECOVERY SERVICES: Family Support	RECOVERY SERVICES: Peer Support	SERVICE COORDINATION: Case Management and Health Home	
	Timeliness	Timeliness	Timeliness	Timeliness	Proximity	Proximity	Timeliness: Routine	Proximity
	Immediate access to crisis response services by means of telephone, electronic, or face-to-face communication 24 hours. A day/ 365 days a year.	Crisis evaluation within 24 hours	The first appointment shall occur within four weeks of the individual's request of support for community living	The initial referral shall take place within 60 days of the individual's request of support for employment	An individual receiving recovery services shall not have to travel more than 30 miles if residing in an urban area or 45 miles if residing in a rural area to receive services	An individual receiving recovery services shall not have to travel more than 30 miles if residing in an urban area or 45 miles if residing in a rural area to receive services	An individual shall receive service coordination within 10 days of the initial request for such service or being discharged from an inpatient facility	An individual receiving service coordination shall not have to travel more than 30 miles if residing in an urban area or 45 miles if residing in a rural area to receive services.
Central Iowa Community Services	Met	Met	Met	Met	Met	Met	Met	Met
County Rural Offices of Social Services	Met	Met	Met	Met	Met	Met	Met	Met
County Social Services	Met	Met	Met	Met	Unmet	Unmet	Met	Met
Eastern Iowa MHDS Region	Met	Met	Unmet	Met	Met	Met	Met	Met
Heart of Iowa Region	Met	Met	Met	Met	Met	Met	Met	Met
MHDS of East Central Region	Met	Met	Met	Met	Met	Met	Met	Met
Northwest Iowa Care Connections	Met	Met	Met	Met	Met	Met	Met	Met
Polk County Health Services	Met	Met	Met	Met	Met	Met	Met	Met
Rolling Hills Community Services Region	Met	Met	Met	Met	Met	Met	Met	Met
Sioux Rivers MHDS	Met	Met	Met	Met	Met	Met	Met	Met
South Central Behavioral Health Region	Met	Met	Met	Met	Met	Met	Met	Met
Southeast Iowa Link	Met	Met	Met	Met	Met	Met	Met	Met
Southern Hills Regional Mental Health	Met	Met	Met	Met	Met	Unmet	Met	Met
Southwest Iowa MHDS Region	Met	Met	Met	Met	Met	Met	Met	Met

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## Quality

- Iowa Code requires Regions to provide access to evidenced based practices (EBP).
- EBPs are practices that have consistent scientific evidence showing they improve individual outcomes.
- Iowa Administrative Code requires the Regions ensure that access is available to the seven (7) evidence based practices identified with (\*) in the chart below as well as provide services that effectively treat individuals with Co-Occurring conditions and use Trauma-Informed Care practices. The chart also includes two additional core evidence based practices Regions are to provide if funding is available.
- This chart shows how many providers are implementing the required practices. At this time 4 of the evidenced based practices have at least one provider meeting independently verified fidelity standards.
- The data are as reported by Regional CEOs.



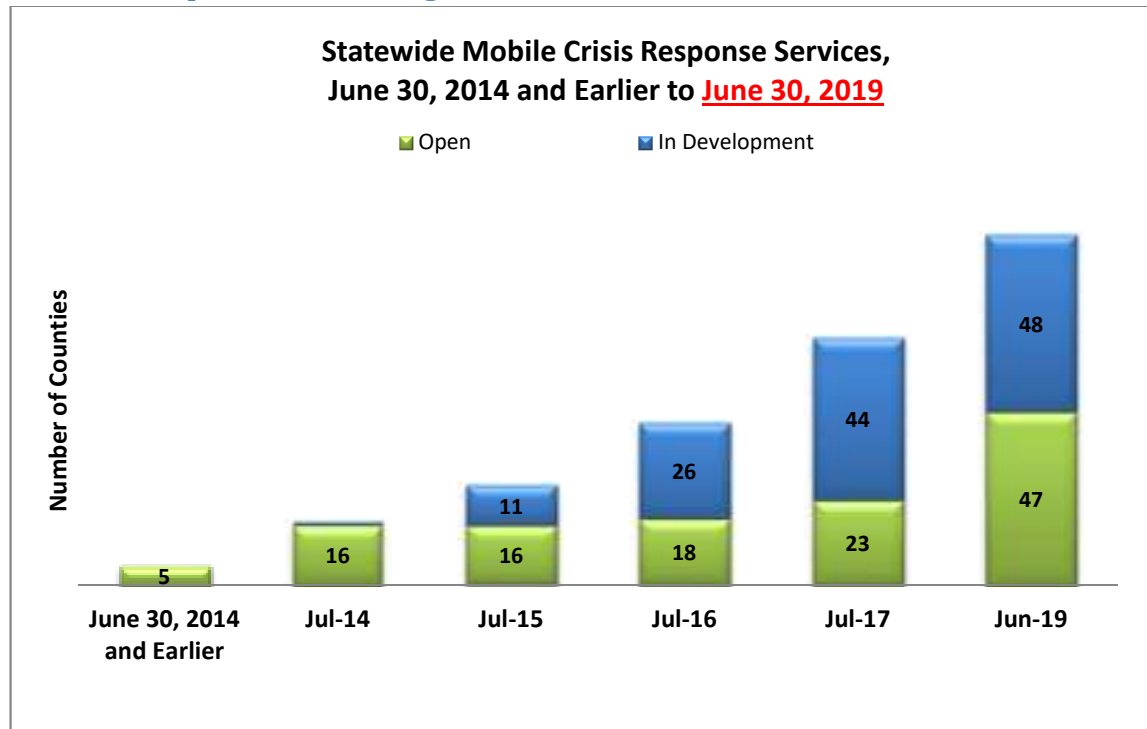
## New Core Mental Health and Disability Services: Implementation and Access Standard Progress

- New core services are to be implemented on or before July 1, 2021.
- The data represents regions' progress in implementing the new core services as of **SFY2019 Quarter 4: June 30, 2019**.
- Data are self-report by Regional CEOs. Charts reported by quarter for data available starting SFY2019.
- **Open** indicates the service is available to individuals in the Region.
- **In-Development** indicates the Region is developing the service with an anticipated start date.

### Mobile Crisis Response

- On-site, face-to-face mental health crisis services for an individual experiencing a mental health crisis.
- The data reflects the number counties statewide and percent of counties per region that have mobile crisis response services available or in-development

### Statewide Implementation Progress



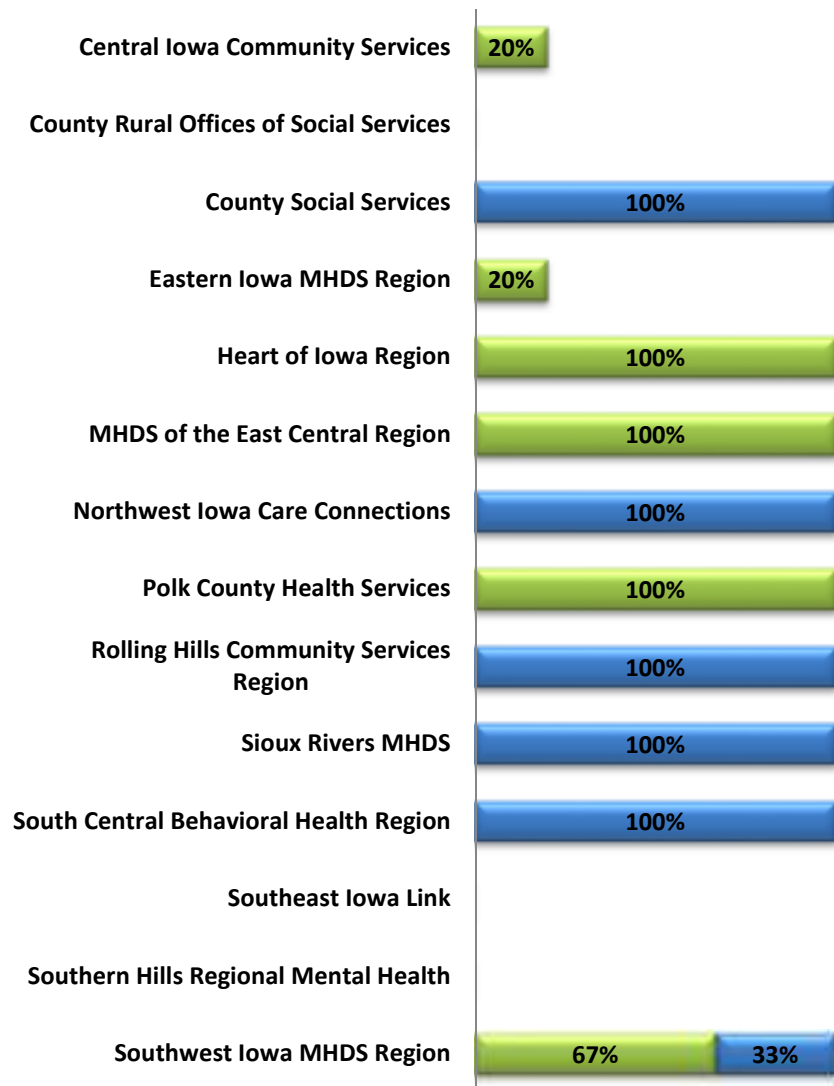
### Access Standard Progress

CRISIS: Mobile Response	
*In order to meet access standard on or after 7/1/2021, Regions must meet all requirements in Chapter 25.	
Region	Timeliness Face-to-face contact with mobile crisis staff within 60 minutes of dispatch.
Central Iowa Community Services	Met
County Rural Offices of Social Services	Developing
County Social Services	Developing
Eastern Iowa MHDS Region	Met
Heart of Iowa Region	Met
MHDS of East Central Region	Developing
Northwest Iowa Care Connections	Met
Polk County Health Services	Met
Rolling Hills Community Services Region	Developing
Sioux Rivers MHDS	Developing
South Central Behavioral Health Region	Met
Southeast Iowa Link	Developing
Southern Hill Regional Mental Health	
Southwest Iowa MHDS Region	Met



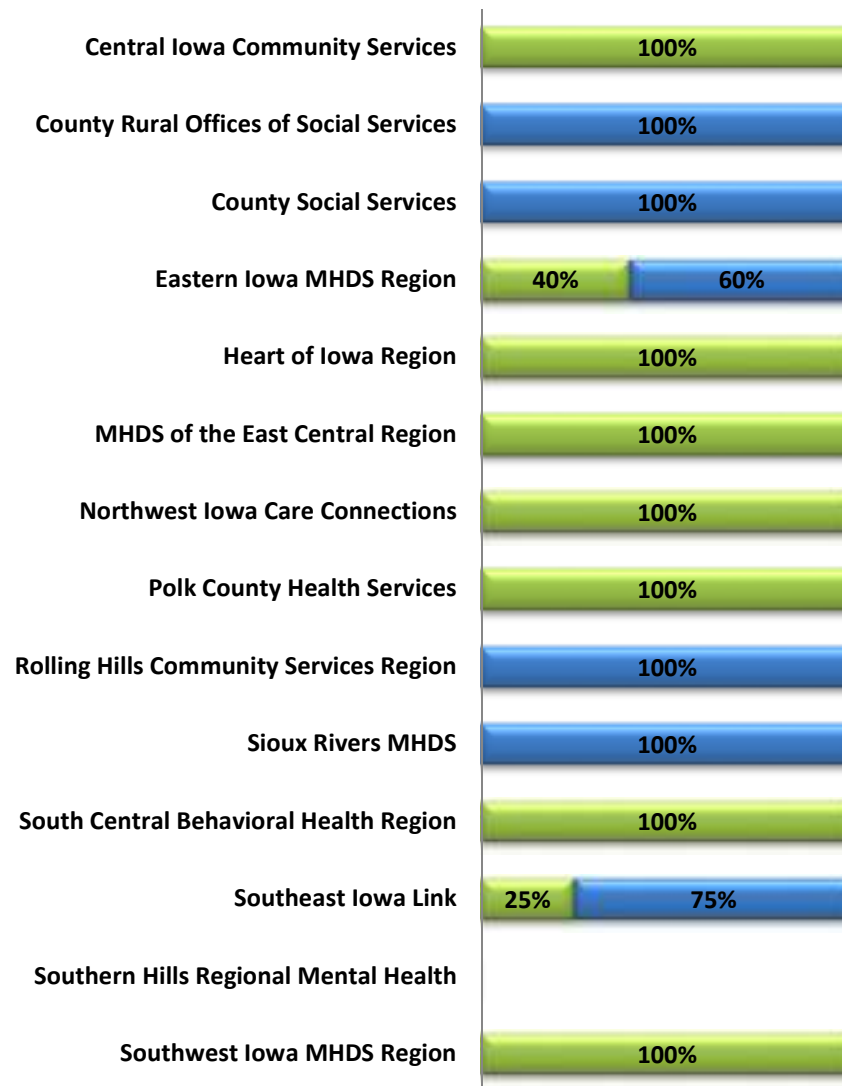
### Percent of Counties within the Region with Mobile Crisis Response Services by Region as of June 30, 2017

■ Open ■ In Development



### Percent of Counties within the Region with Mobile Crisis Response Services by Region as of June 30, 2019

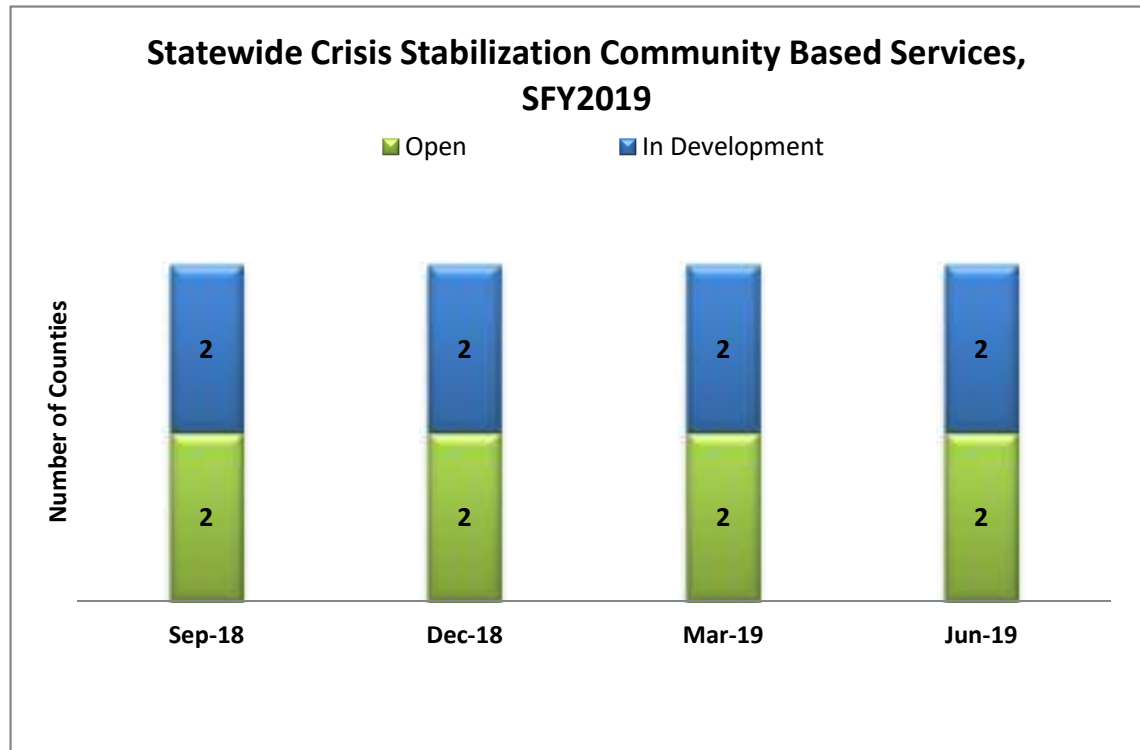
■ Open ■ In Development



## Crisis Stabilization Community Based Services (CSCBS)

- Short-term alternative living arrangement designed to de-escalate a crisis situation and stabilize an individual following a mental health crisis and provided where the individual lives, works or recreates.
- The data reflects the number counties statewide that have Crisis Stabilization Community Based Services available or in-development.

### Statewide Implementation Progress



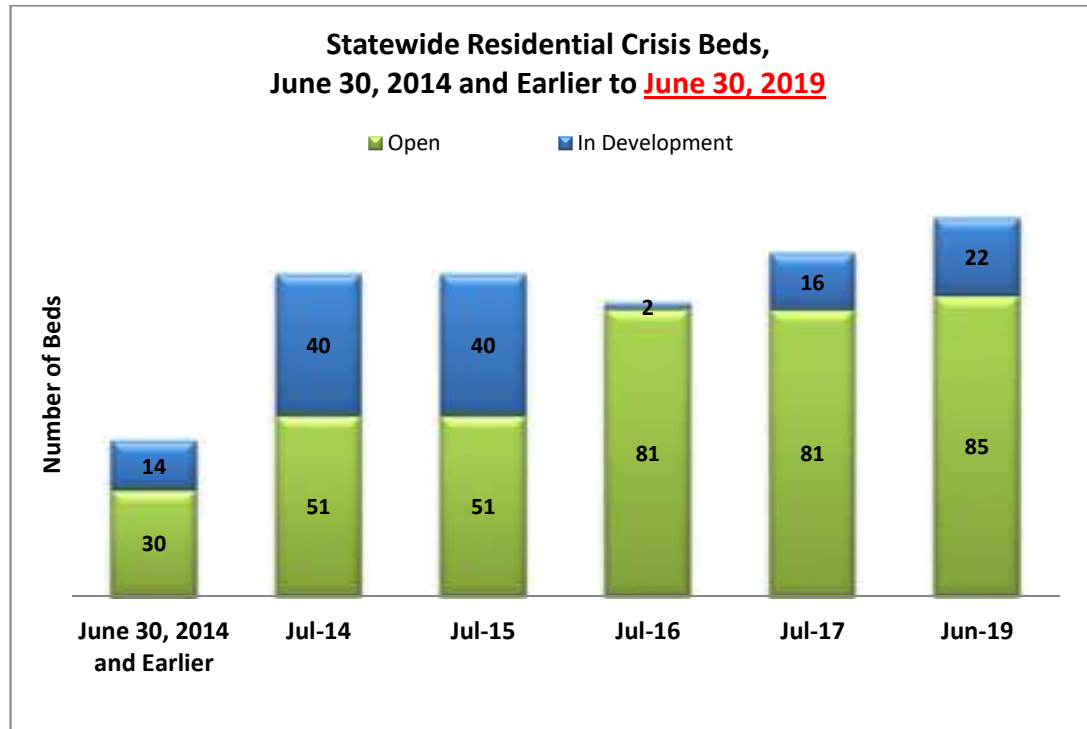
### Access Standard Progress

CRISIS: CSCBS	
<i>*In order to meet access standard on or after 7/1/2021, Regions must meet all requirements in Chapter 25.</i>	
Region	Timeliness Face-to-face contact from CSCBS provider within 120 minutes from the time of referral.
Central Iowa Community Services	
County Rural Offices of Social Services	
County Social Services	
Eastern Iowa MHDS Region	
Heart of Iowa Region	
MHDS of East Central Region	
Northwest Iowa Care Connections	Developing
Polk County Health Services	
Rolling Hills Community Services Region	
Sioux Rivers MHDS	
South Central Behavioral Health Region	
Southeast Iowa Link	Developing
Southern Hill Regional Mental Health	
Southwest Iowa MHDS Region	

## Crisis Stabilization Residential Services (CSRS) Beds

- Residential settings that de-escalate and stabilize an individual experiencing a mental health crisis.
- The data reflects the number of CSRS beds statewide that are available or in-development.

### Statewide Implementation Progress

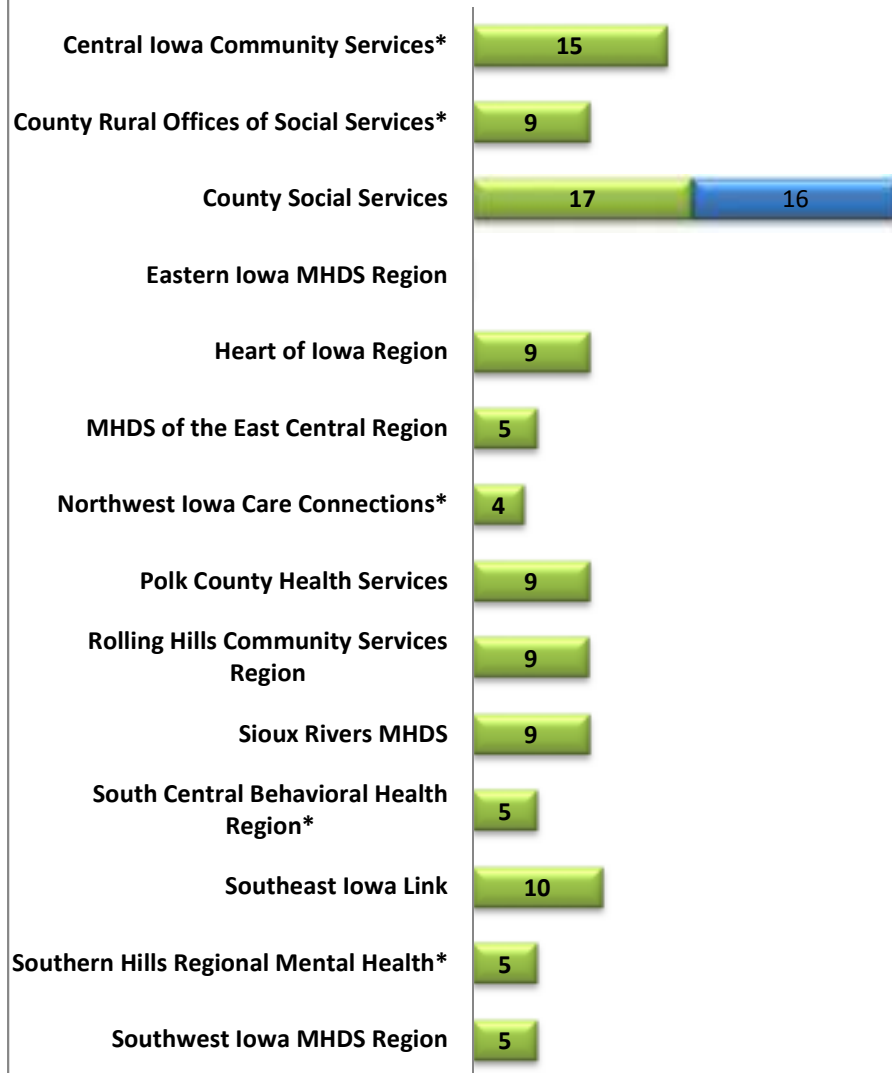


### Access Standard Progress

CRISIS: CSRS		
<i>*In order to meet access standard on or after 7/1/2021, Regions must meet all requirements in Chapter 25.</i>		
Region	Timeliness Service provided within 120 minutes from the time of referral.	Proximity Service is located within 100 miles from the individual's residence.
Central Iowa Community Services	Met	Met
County Rural Offices of Social Services	Met	Met
County Social Services	Met	Met
Eastern Iowa MHDS Region	Developing	Developing
Heart of Iowa Region	Met	Met
MHDS of East Central Region	Met	Met
Northwest Iowa Care Connections	Met	Met
Polk County Health Services	Met	Met
Rolling Hills Community Services Region	Met	Met
Sioux Rivers MHDS	Met	Met
South Central Behavioral Health Region	Met	Met
Southeast Iowa Link	Met	Met
Southern Hill Regional Mental Health	Met	Met
Southwest Iowa MHDS Region	Met	Met

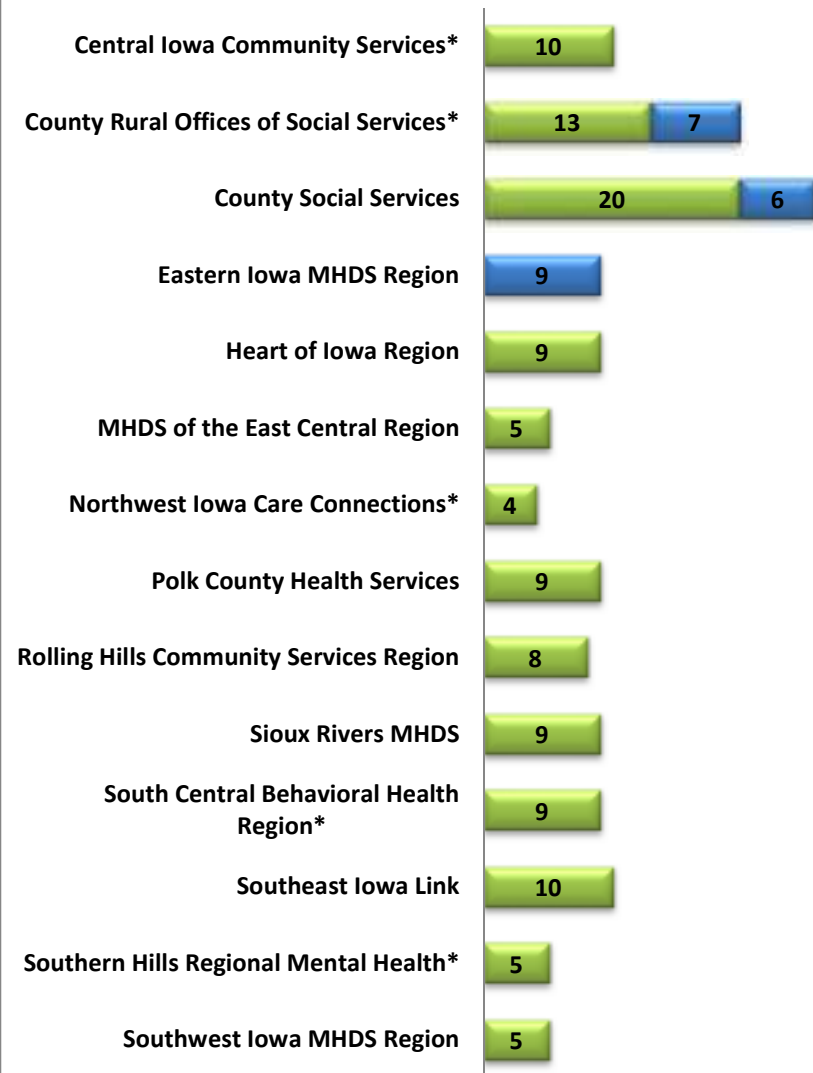
### Number of Crisis Stabilization Residential Services Beds by Region as of June 30, 2017

■ Open ■ In Development



### Number of Crisis Stabilization Residential Services Beds by Region as of June 30, 2019

■ Open ■ In Development

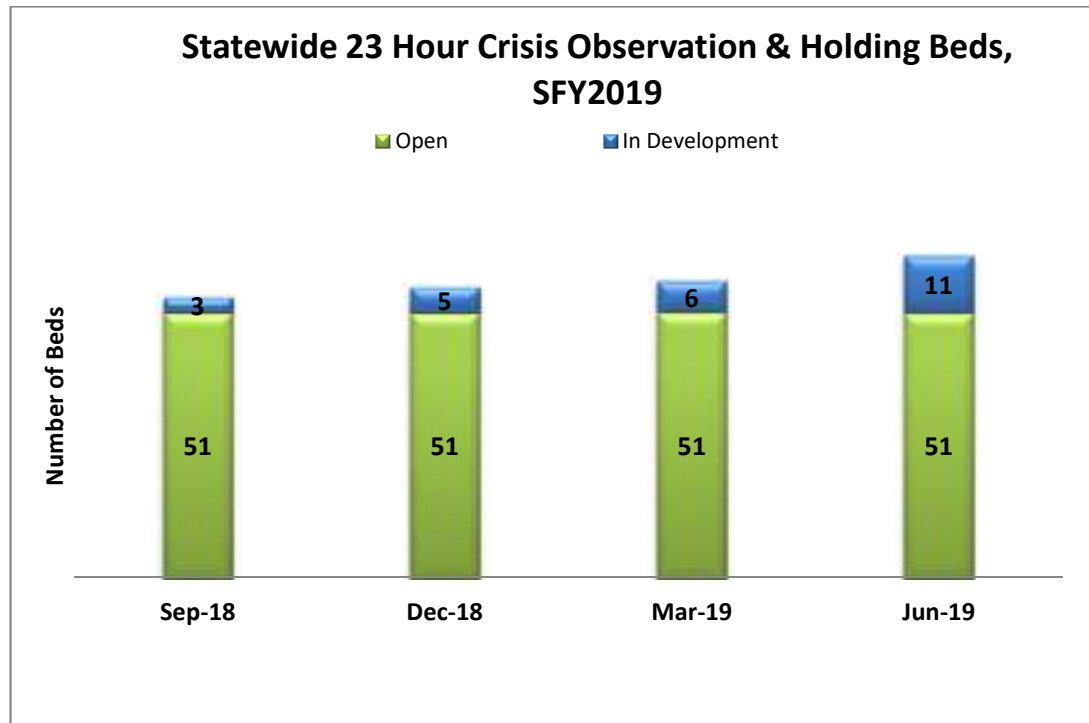


\*Contracts all or some of their beds from another region.

## 23 Hour Crisis Observation and Holding

- A level of care provided for up to 23 hours in a secure and protected, medically staffed, psychiatrically supervised treatment environment.
- The data reflects the number of 23 hour crisis observation and holding beds statewide that are available or in-development.

### Statewide Implementation Progress



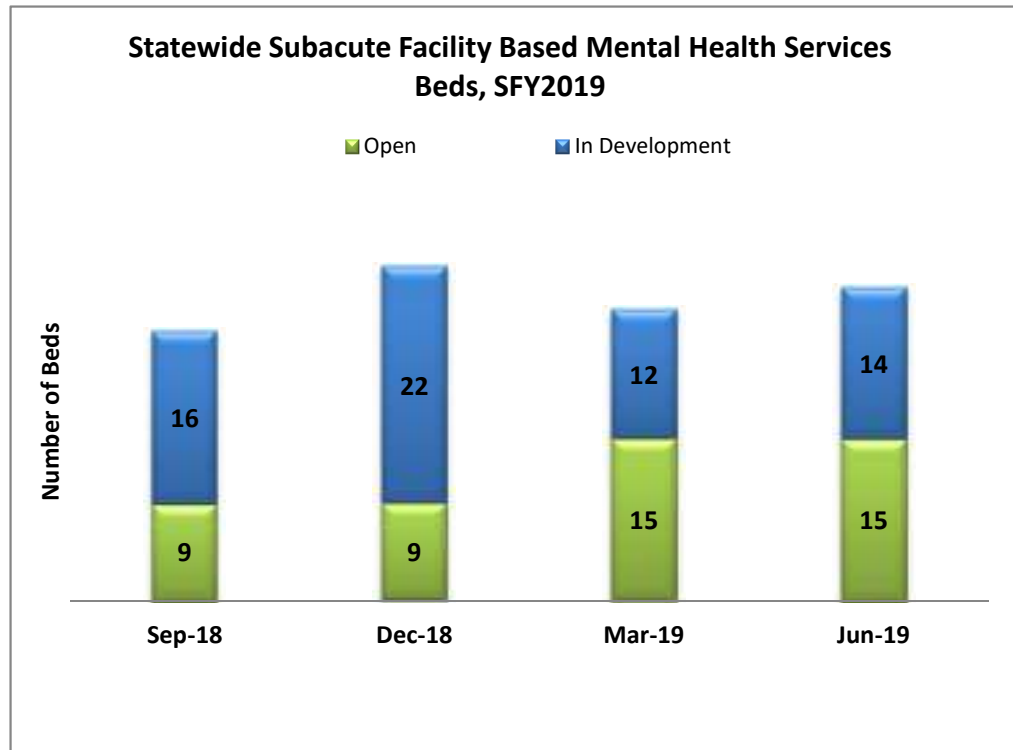
### Access Standard Progress

CRISIS: 23 Hour Observation and Holding		
*In order to meet access standard on or after 7/1/2021, Regions must meet all requirements in Chapter 25.		
Region	Timeliness	Proximity
	Service provided within 120 minutes from the time of referral.	Service is located within 100 miles from the individual's residence.
Central Iowa Community Services	Met	Met
County Rural Offices of Social Services	Met	Met
County Social Services	Developing	Developing
Eastern Iowa MHDS Region	Met	Met
Heart of Iowa Region	Developing	Developing
MHDS of East Central Region	Met	Met
Northwest Iowa Care Connections	Met	Met
Polk County Health Services	Met	Met
Rolling Hills Community Services Region		
Sioux Rivers MHDS	Met	Met
South Central Behavioral Health Region	Met	Met
Southeast Iowa Link	Met	Met
Southern Hill Regional Mental Health	Developing	Developing
Southwest Iowa MHDS Region		

## Subacute Facility Based Mental Health Services

- Subacute is a comprehensive set of wraparound services for individuals that have or are at risk of having an acute or crisis mental health symptoms but do not need acute inpatient care.
- The data reflects the number of subacute beds statewide that are available or in-development.

### Statewide Implementation Progress



### Access Standard Progress

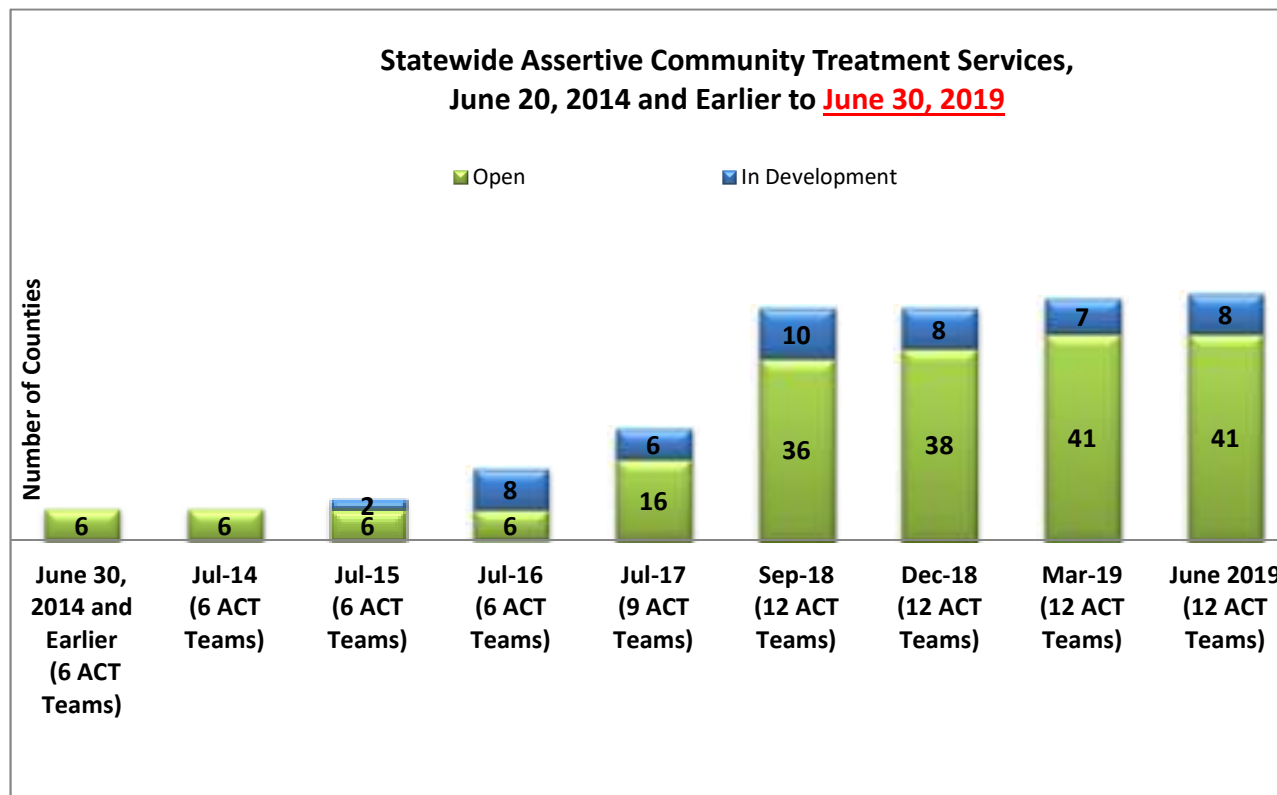
CRISIS: Subacute Facility Based Mental Health Services		
<i>*In order to meet access standard on or after 7/1/2021, Regions must meet all requirements in Chapter 25.</i>		
Region	Timeliness	Proximity
	Services provided within 24 hours of referral.	Service is located within 100 miles from the individual's residence.
Central Iowa Community Services	Met	Developing
County Rural Offices of Social Services	Developing	Developing
County Social Services	Met	Developing
Eastern Iowa MHDS Region	Met	Met
Heart of Iowa Region	Developing	Developing
MHDS of East Central Region	Met	Met
Northwest Iowa Care Connections		
Polk County Health Services		
Rolling Hills Community Services Region		
Sioux Rivers MHDS		
South Central Behavioral Health Region	Developing	Developing
Southeast Iowa Link	Met	Developing
Southern Hill Regional Mental Health	Developing	Developing
Southwest Iowa MHDS Region		



## Assertive Community Treatment Programs

- Comprehensive, community-based outpatient services provided to individuals with a serious mental illness that require multiple mental health and support services to live in the community. Services are available for individuals located within 30 minutes (urban) or 45 minutes (rural) from where the team is located.
- The map shows the county where ACT programs are available or in-development as of **June 30, 2019**.
- There are currently 12 ACT programs open in Iowa serving 41 counties as of **June 30, 2019**

## Statewide Implementation Progress

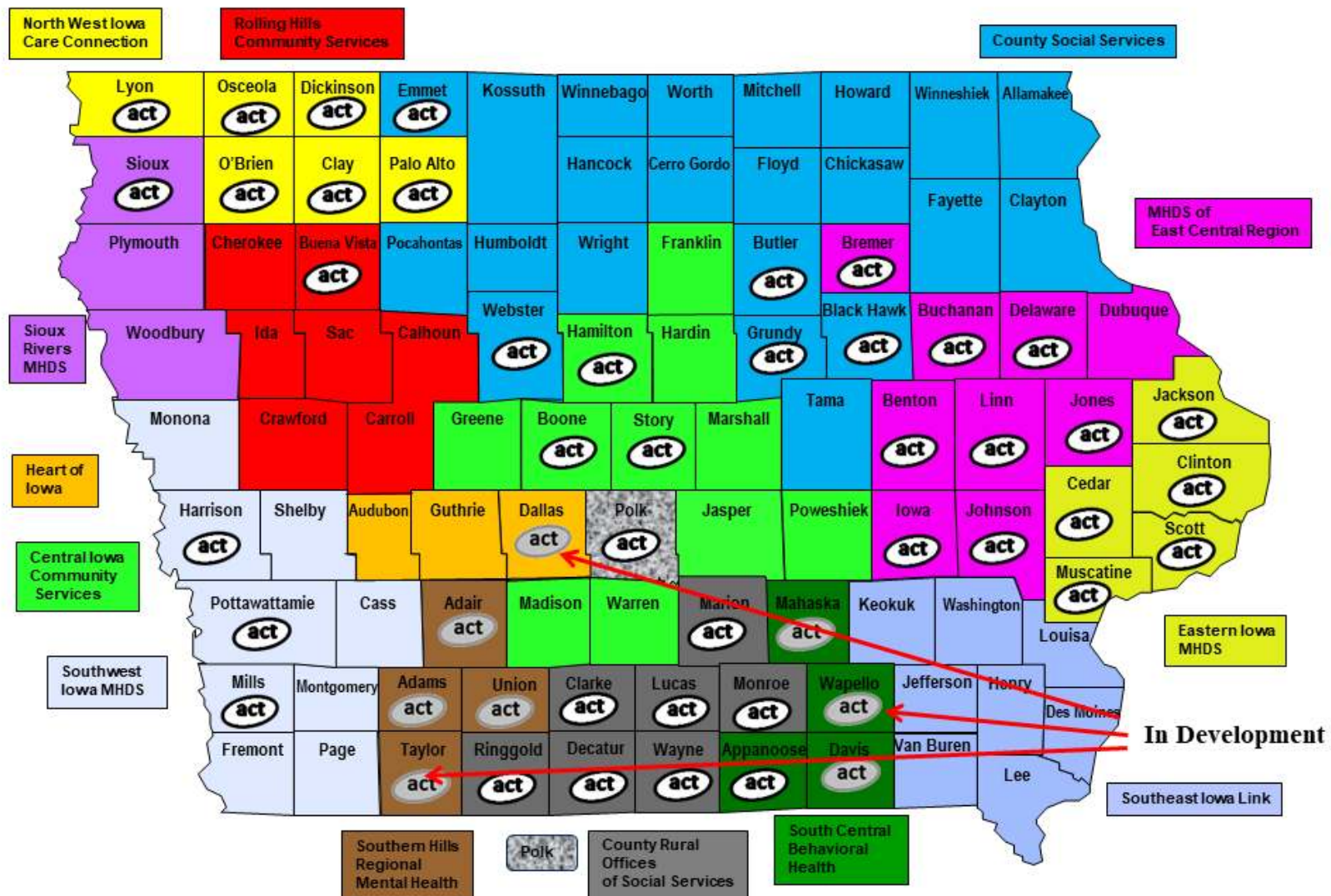


## Access Standard Progress

INTENSIVE MENTAL HEALTH SERVICES: ACT	
<i>*In order to meet access standard on or after 7/1/2021, Regions must meet all requirements in Chapter 25.</i>	
Region	Capacity 0.06% of the Region's population has access to ACT services.
Central Iowa Community Services	Met
County Rural Offices of Social Services	Met
County Social Services	Met
Eastern Iowa MHDS Region	Met
Heart of Iowa Region	Developing
MHDS of East Central Region	Met
Northwest Iowa Care Connections	Met
Polk County Health Services	Met
Rolling Hills Community Services Region	Developing
Sioux Rivers MHDS	Developing
South Central Behavioral Health Region	Developing
Southeast Iowa Link	
Southern Hill Regional Mental Health	Developing
Southwest Iowa MHDS Region	Developing

- act** = Counties with ACT program available
- act** = Counties with ACT program in development

## Assertive Community Treatment Programs



June 2019

## Intensive Residential Services

- Intensive, community-based services provided 24 hours a day, 365 days a year to individuals with a severe and persistent mental illness or multi-occurring conditions.

### Access Standard Progress

<b>INTENSIVE MENTAL HEALTH SERVICES: Intensive Residential Services</b> <i>*In order to meet access standard on or after 7/1/2021, Regions must meet all requirements in Chapter 25.</i>		
Region	Timeliness	Proximity
	Services provided within 4 weeks of referral.	Service is available within 2 hours from the individual's residence.
Central Iowa Community Services		
County Rural Offices of Social Services		
County Social Services		
Eastern Iowa MHDS Region		
Heart of Iowa Region		
MHDS of East Central Region		
Northwest Iowa Care Connections		
Polk County Health Services		
Rolling Hills Community Services Region		
Sioux Rivers MHDS		
South Central Behavioral Health Region		
Southeast Iowa Link		
Southern Hill Regional Mental Health		
Southwest Iowa MHDS Region		

## Access Center

- Access centers are coordinated services providing assessment and screening for multi-occurring conditions, care coordination, crisis stabilization residential services, subacute mental health services, and substance use disorder treatment for individuals experiencing a mental health or substance use crisis who do not need inpatient psychiatric hospital treatment, but need significant amounts of supports and services not available in home and community based settings on a no eject, no reject basis.

## Access Standard Progress

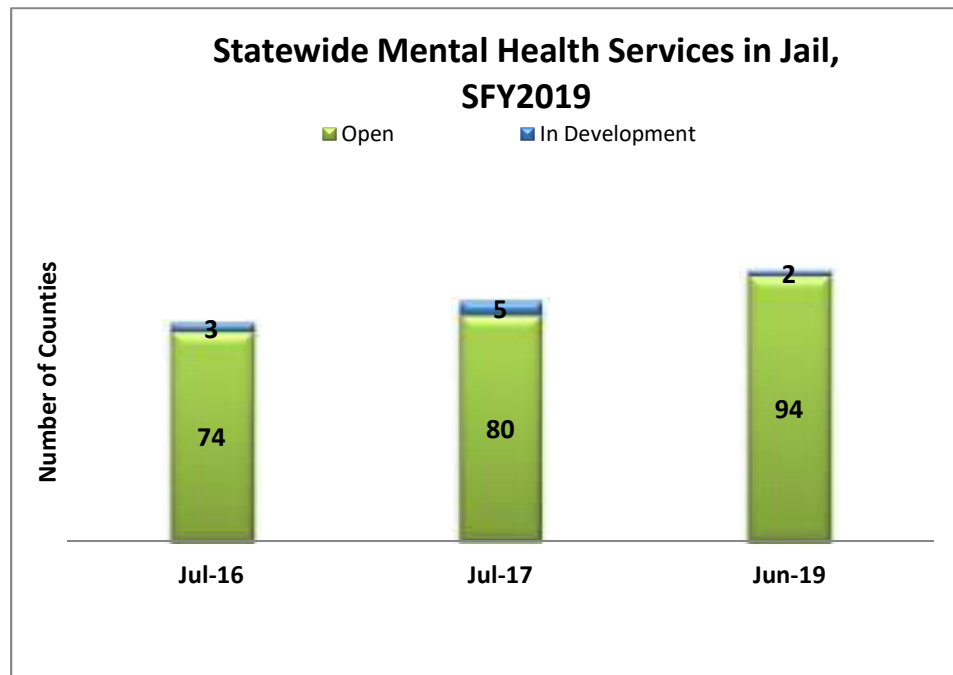
<b>INTENSIVE MENTAL HEALTH SERVICES: Access Center</b> <i>In order to meet access standard on or after 7/1/2021, Regions must meet all requirements in Chapter 25.</i> <i>*Region is planning to meet access standards by coordinating with another region where access center services will be located.</i>		
Region	Timeliness	Proximity
	Services provided within 90 minutes from the determination that services are needed.	Service is located within 100 miles from the individual's residence.
Central Iowa Community Services		
County Rural Offices of Social Services	Developing	Developing
County Social Services	Developing	Developing
Eastern Iowa MHDS Region		
Heart of Iowa Region	Developing	Developing
MHDS of East Central Region		
Northwest Iowa Care Connections		
Polk County Health Services	Developing	Developing
Rolling Hills Community Services Region	Developing	Developing
Sioux Rivers MHDS		
South Central Behavioral Health Region	Developing	Developing
Southeast Iowa Link*	Developing	Developing
Southern Hills Regional Mental Health*	Developing	Developing
Southwest Iowa MHDS Region		

## Additional Core Mental Health and Disability Services Implementation

- Additional Core services are as of [SFY2019 Quarter 4: June 30, 2019](#).
- Data are self-report by Regional CEOs.
- **Open** indicates the service is available to individuals in the Region.
- **In-Development** indicates the Region is developing the service with an anticipated start date

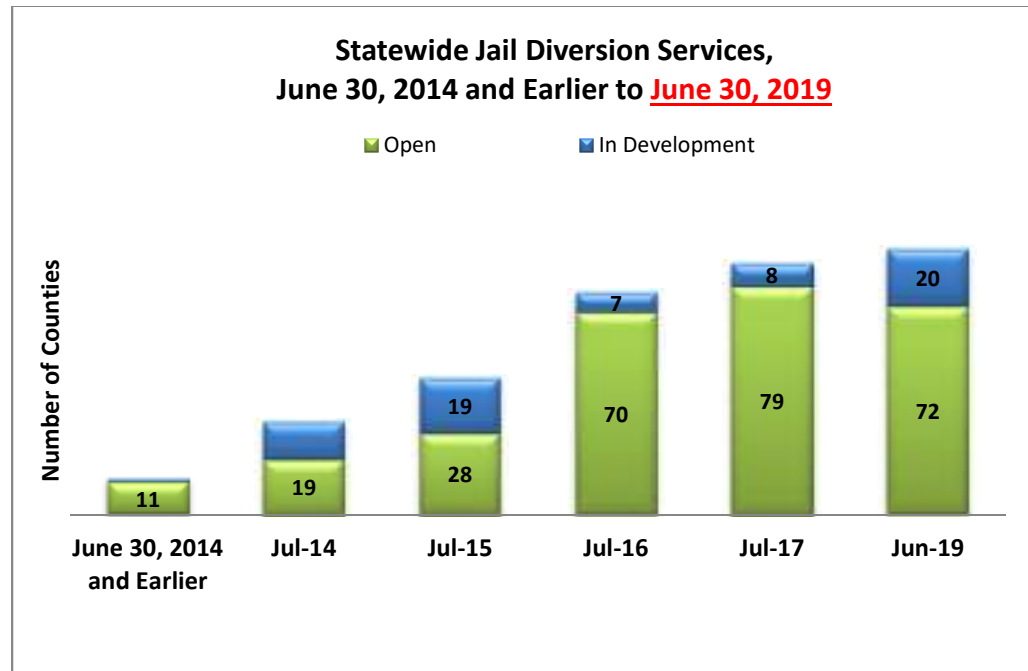
### Mental Health Services in Jail

- Outpatient mental health services provided to individuals in criminal justice settings.
- The data reflects the number counties statewide that mental health services in jail services are available or in-development.



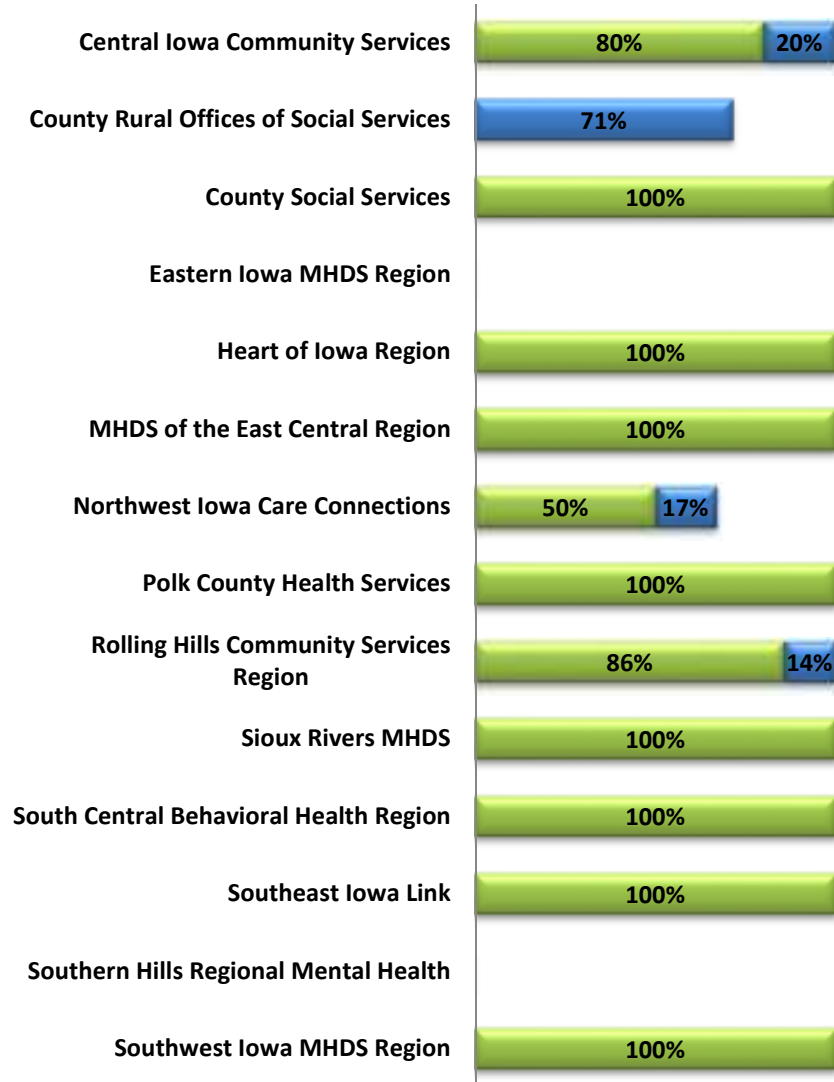
## Jail Diversion Services

- Community-based treatment and support services to individuals with mental illness involved in the criminal justice system to eliminate unnecessary incarceration.
- The data reflects the number counties statewide and percent of counties per region that jail diversion services are available or in-development.



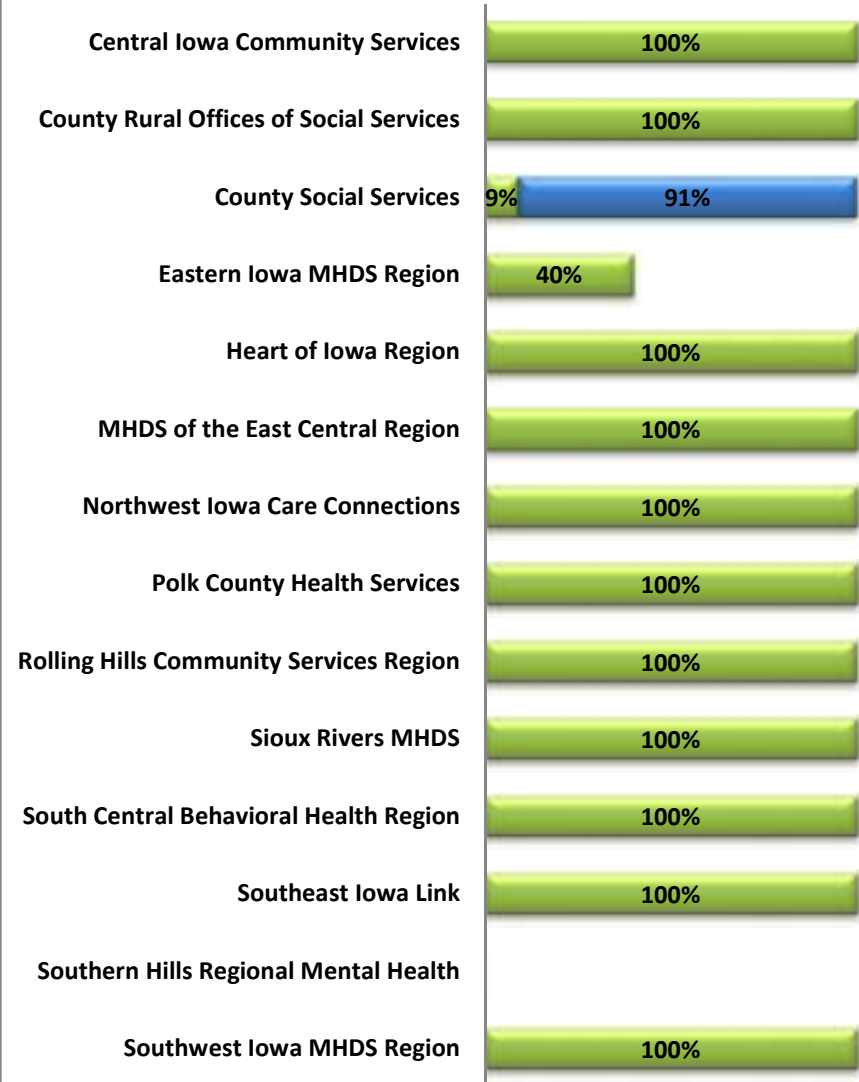
### Percent of Counties within the Region with Jail Diversion Services by Region as of June 30, 2017

■ Open ■ In Development



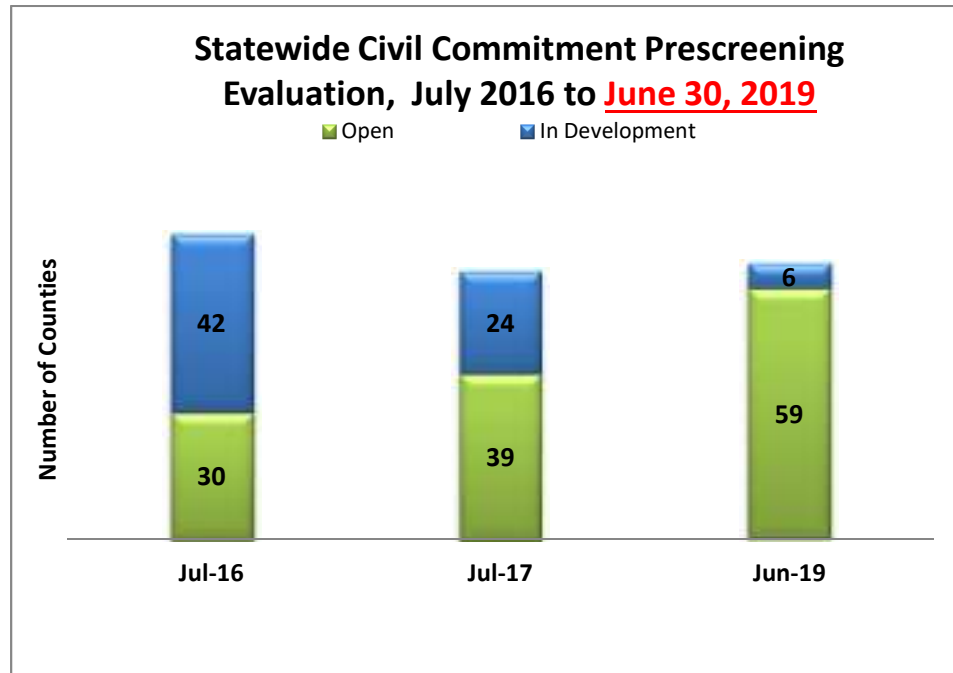
### Percent of Counties within the Region with Jail Diversion Services by Region as of June 30, 2019

■ Open ■ In Development



## Civil Commitment Prescreening Evaluation

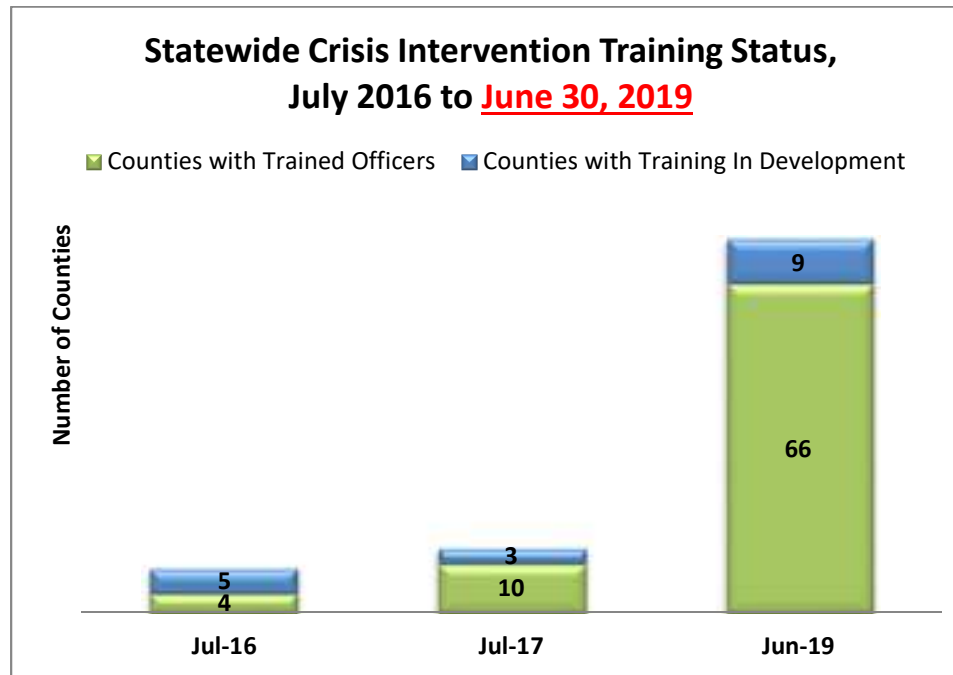
- Evaluations completed prior to commitment with the goal to divert the individual from the commitment process.
- The data reflects the number counties statewide that civil commitment prescreening evaluations are available or in-development.





## Crisis Intervention Training

- Specific crisis intervention training for law enforcement
- The data reflects the number counties statewide that have trained officers or training in-development.



## Crisis Prevention Training

- Training for law enforcement, first responders, etc. regarding mental health awareness other than CIT.
- All officers are required to receive crisis prevention training through the Law Enforcement Academy.

## Appendix A – Regional Services Grid

Mental Health and Disability Services Regions fund services for residents who meet diagnostic and financial eligibility requirements. This grid provides the details of the Services by Diagnosis charts. All services can be designated into one of three categories:

- **Community living supports** are those services that Regions are not required to fund, but choose to fund for eligible residents of their region. Supports may not meet “medical necessity” criteria but are critical to a person’s well-being and life in a community. It also includes the mental health commitment costs Iowa Code mandates Regions to fund.
- Supplemental Services are those services that Regions are not required to fund, but choose to fund to eligible residents of their region and mandated commitment costs;
- Core services are the services regions are required by Iowa Code to fund; and
- Additional Core Services are services identified in Iowa Code that Regions are to fund when public funds are made available for such services.

The type of services can be identified as:

- Community and Coordination Services;
- Housing and Community Living Supports;
- Treatment Services; and
- Vocational and Day Services.

Regional Services	Community Living Supports	Core Services	Additional Core Services
<b>Community and Coordination Services</b>			
Information & Referral, Consultation, and Public Education	X		
Provider Education for Evidence Based Practices		X	
Case Management or Health Home Coordination		X	
Service Management	X		
Crisis Coordination Services	X		
Justice System Involved Coordination Services, and Mental Health Court			X
Crisis Prevention Training			X
<b>Housing and Community Living Supports</b>			
Academic Services	X		
Transportation	X		
Home Health Aides		X	
Chore Services	X		
Personal Emergency Response		X	
Respite Services		X	
Guardian/Conservator/Payee	X		
Home/Vehicle Modification		X	

Supported Community Living		X	
Consumer Directed Attendant Care	X		
Supportive Housing		X	
Food, Rent, Utilities, and/or Basic Needs	X		
Family and Peer Support Services, and Family Psychoeducation		X	
Subacute Services			X
Residential Care Facilities	X		
Intermediate Care Facilities & State Resource Centers	X		
<b>Treatment Services</b>			
Physiological Treatment: Outpatient, In-Home Nursing, & Health Supplies	X		
Prescription Medication	X		
Psychotherapeutic-Outpatient, and Medication Prescribing & Management		X	
Partial Hospitalization	X		
Transitional Living Program	X		
Day Treatment Services	X		
Peer Self-help Drop-in Center			X
Community Support Programs	X		
Psychiatric Rehabilitation			X
Assertive Community Treatment (ACT)		X	
Assessment & Evaluation (non-crisis)		X	
Inpatient Treatment		X	
Crisis Evaluation		X	
Emergency Medical Care	X		
24 Hour Crisis Response Services		X	
Mobile Response, 23 Hr. Observation, & Crisis Stabilization Services			X
24 Hour Crisis Line & Warm Line			X
Mental Health Services in Jails			X
Iowa Medical & Classification Center*	X		
Commitment Services*	X		
Prescreening Evaluation			X
<b>Vocational and Day Services</b>			
Vocational Skills Training, Supportive Education, & Sheltered Work	X		
Prevocational Services		X	
Day Habilitation		X	
Job Development & Supported Employment		X	

\* Mandated commitment costs